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PERCEPTION AMONG WOMEN ABOUT INVOLVING MEN IN FAMILY PLANNING

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ABSTRACT

Background: The family planning has always been a female domain. Gender issues, lack of awareness, misconceptions about male methods compounded by programmatic factors with excessive weightage to female methods has led to reduced utilization of male contraceptives. **Objective:** This study was done to know the perception of women towards male oriented contraceptives. **Methodology:** Field based cross-sectional study was done on the 300 married women residing in an urban slum of Bijapur. **Results:** couple protection rate was 65.3%. Of the 196 contraceptive users only 17(8.7%) were using condom and none of the subject's partner had undergone vasectomy. The most common reasons for non acceptance of condom were gender issues (93.6%) and inconvenience (59.7%). Vasectomy was not preferred because of gender issues (93.6%), misconceptions (52.6%) and lack of awareness (32.6%). **Conclusion:** Contraceptive usage among male can be increased by improving IEC activities and making suitable changes in approach of family planning services.

KEYWORDS: family planning, gender issues, male contraceptives, women perceptions



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INTRODUCTION

The family planning has always been a female domain. Women leads a main role in contraception whereas men's job is supportive in nature¹. Gender issues, lack of awareness, misconceptions about male methods compounded by programmatic factors with excessive weightage to female methods has led to reduced utilization of male contraceptives^{2&3}. International Conference on Population and Development held in Cairo in 1994 emphasized the need for gender equality in reproductive and sexual health⁴. Men should be informed about reproductive health and women's reproductive rights⁵. Many studies in India have shown the inadequate involvement of men in family planning programmes^{6, 7&8}. The participation of men in family planning requires social and behavioral change. This not only helps to attract more men for accepting contraception but also to support women in reproductive health matters. The role of men assumes even more significance with the emergence of HIV/AIDS^{9&10}. The present study was therefore undertaken to assess women's perceptions towards contribution of male partners in family planning and identify the reasons for male methods of contraception

taking a back seat in family planning programme.

MATERIALS AND METHODS

Field based cross-sectional study was done on the married women (15yr – 49yr) residing in an urban slum of Bijapur. The sample size was calculated using the formula $Z = 4PQ / D^2$ as 258 (NHFS-3⁵, prevalence (P) of Family Planning practices in Karnataka for urban population was 60.8 %, at the 5 % significance, with 10 % allowable error). The total sample size was rounded off to 300. After taking consent the woman were interviewed using a pretested questionnaire. Data was analysed by statistical tests like proportions & percentages.

RESULTS AND DISCUSSION

Majority women were Hindus (71.3 %) and Muslims were 28.7%. Most women were in the age group of 20-29yrs (29.6%) and from joint family (59%). Majority women (62.3%) were from lower socioeconomic strata since the study was conducted in slum (Modified Prasad Classification).

Table 1
Distribution of the participants according to the method of contraception

Method	Frequency	Percent
Tubectomy	111	56.6
OCP	36	18.4
IUD	32	16.3
Condom	17	8.7
Vasectomy	0	0
Total	196	100.0

Of the 300 women interviewed 196 were users of contraception. Thus couple protection rate in the study area was 65.3%. Among the users most common method of contraception was Tubectomy (56.6%). Other methods were OCP (18.4%), IUD (16.3%) and Condom (8.7%). Vasectomy was not accepted by any of the subject's partner. Similar observations were made by Balaiah et al⁶ in rural community of Maharashtra where condom was used by only 3.5% and 0.5% were vasectomised. Anju Puri et al⁷ reported that 58.3% of contraceptive users had tubectomy and vasectomy was not

accepted by any of subject's partner. These studies show that the male methods of contraception (condom/vasectomy) are rarely practiced by couple and point towards male dominant nature of society with family planning as a female domain.

Table 2
Reasons for not accepting Condom

Reason*	Frequency	Percentage
Family Planning is female domain	281	93.6
Inconvenience	179	59.6
fear of failure / side effects	142	47.3
problem of storage and disposal	127	42.3
Others	83	27.6

*multiple responses allowed & n= 300

Though all couples were aware of the condom as a method of contraception only 8.7% of users were following this method. When enquired women about low usage of condom the most common response was that family planning is a female responsibility (93.6%) and their husband play only an auxiliary role. The other reasons were inconvenience (59.6%), fear of failure or side effects (47.3%) and problems of storage & disposal (42.3%). Similar reasons were reported by Balaiah et al ⁶. A study conducted in South India by Ramachandran¹¹ revealed that many condom users discontinued due to dissatisfaction and fear of side effects. There is a need to improve IEC activities regarding use of condom especially in context of emergence of HIV/AIDS and other sexually transmitted diseases¹². The attitudes of men need to be changed and method related issues like inconvenience and misconceptions can be reduced by proper counseling.

Table 3
Reasons for not accepting Vasectomy

Reason*	Frequency	Percentage
FP is female domain	281	93.6
fear / misconceptions	158	52.6
Lack of awareness	98	32.6
Others	65	21.6

*multiple responses allowed & n= 300

The majority of women consider childbearing and family planning as her responsibility (93.6%). None of the women want her husband to undergo operation. Many (52.6%) feared of weakness following surgery. They don't want their husband to lose working capacity because of the vasectomy. Some of the women even felt that vasectomy leads to impotency. Lack of awareness (32.6%) was also noticed among some of the respondents. Balaiha et al ⁶ observed that factors which prevent men from undergoing vasectomy are misconceptions like reduced manual work capacity, sexual potency, status in society. As observed in the present study and other studies^{6, 7&8} vasectomy is the

least preferred method of contraception among couples. The gender issues related to the acceptability of vasectomy in a male dominant society required to be addressed. The lack of awareness and misconceptions about vasectomy can be reduced by aggressive IEC and behavior change communication (BCC) activities. Incentive scheme for vasectomy can be a useful strategy.

CONCLUSION

This study exposes the scarce involvement of men in family planning programs. This is mainly

due to social and cultural issues in the society favoring female responsibility. The lack of awareness and misconceptions add to these factors. The undue weightage to women in family planning programmes has led to men role taking a back seat^{13&14}. There is need to address the gender issues related to

contraception use by men. The behavior and attitude of society towards male participation in reproductive health and family planning requires urgent attention. Contraceptive usage among male can be increased by improving IEC activities and making appropriate changes in approach of family planning services.

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