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Focus on

Men and Reproductive Health Issues

Male Involvement

The seven countries of the EC/UNFPA Initiative for Reproductive Health in Asia (RHI) have a combined population of more than 424 million. Whilst approximately half of the population is male, their influence in families, relationships and communities is dis-proportionally high. Certain traditions dictate that women are subjected to the decisions of men, pervading almost all areas of their lives. The realisation of this dominance – followed by an appropriate translation into RH programmes – is of vital importance in view of women's control over their sexuality and reproductive health.

The Role of Men in Reproductive Health

■ Until very recently the influence of men was largely ignored by family planning and maternal health programmes. This changed in 1994 when the International Conference on Population and Development (ICPD) in Cairo focused on male involvement in women's reproductive health. This new approach towards men had gone beyond the earlier narrow view of most programme managers and service providers, who tended to see men as contraceptive users or carriers of sexually transmitted infections (STIs). The joint UNAIDS 2000 campaign "Men can make a difference", is just one example of how ideas and approaches in this field have developed since. The RHI endeavours to include male partners as well as fathers, male decision makers and gatekeepers in its activities aimed at improving the RH situation of not only women but also men (see box).

The influence of men is diverse and powerful; men are partners to women with reproductive health needs. Irrespective of the nature of the partnerships, which can be either lifelong or casual relationships with girlfriends or commercial sex workers (CSWs), men are decision-makers in communities and organisations that manage reproductive health services. Moreover, they are service providers, working with both women and other men in clinical service and health education settings and finally are also potential clients of reproductive health services.

Hence the concept of "male involvement" in reproductive health includes the promotion of the awareness and understanding that men vitally influence society at all levels. The Reproductive Health Programmes should consequently urge men to accept responsibility for women's health.

Social and Cultural Realities

■ It seems that male involvement as a programme label is a misnomer.

Men have always been involved in reproductive actions, though their involvement has often had negative consequences for the health and well being of their partners. To be fair, though men are products of their culture and socialisation.

The overall status of women in the RHI countries is lower than that of men. However their standing and decision making power regarding social, health and sexual choices vary greatly; not only from country to country but also within each respective country. In rural areas traditional role models have more hold than in large cities. This is slowly changing as opportunities for women are being opened through education, employment and political efforts with positive repercussions for their RH decision-making powers.

The Current Participation of Men in Reproductive Health

■ Men have not had a broad role in reproductive health nor have they always had routine access to all potential reproductive health services. Often the targeting of men has been specifically related to vasectomy acceptance rather than to the man's broader role within a supportive partnership in making healthy reproductive decisions. Complete information is not always available to them regarding reproductive health service options for their partners. They are often ill informed or unaware of the potentially negative health outcome of a cycle of closely



spaced pregnancies, childbirth, and lactation for women. Their knowledge of the consequences of reproductive tract infections (RTIs) and STIs, particularly for the unborn child, is negligible. Thus, most often men do not understand the importance of safe motherhood services – including the need for both antenatal and postnatal care, as well as access to safe delivery during childbirth. This lack of information is a probable contributory reason to the low levels of antenatal care and trained birth attendants at delivery, particularly for women in Bangladesh and Pakistan.

Potential Programmes to Increase Male Involvement in Reproductive Health

■ Male programmes need to start with adolescents. This is in recognition of the evidence-based fact that men begin their sexual experimentation early and with insufficient information to protect either themselves or their partners. Reproductive health programmes should not be gender-specific but rather focus on both parties. Programmes should encourage joint decision-making. These efforts should begin at an early age to reach male (and female) youths, ideally before or at the beginning of their sexual activities.

In order to provide more effective reproductive health services the curricula of medical schools and paramedical training centres need to be modified. In the short term, gender sensitisation of providers at all levels – doctors, nurses, paramedical staff and grassroots workers – could help improve both access to and the quality of reproductive health services.

Conclusion

■ The importance and urgency for addressing the needs of men's reproductive health are better understood since countries adopted the ICPD agenda. It is critical that full attention be given to improving services for men and their partners if the goal of reaching a healthy reproductive life is to be achieved. There is a vital need for further investments in health education and sensitisation of health providers and decision-makers. Both men and women need an equal understanding of their reproductive health options in order to make decisions throughout life that will enhance their health status.

Ubaidur Rob, December 2000

References:

This fact sheet is based on information found in: Piet-Pelon, N. J., Rob, U., Khan, M. E. (1999). Men in Bangladesh, India and Pakistan: Reproductive Health Issues. Kashraf Publishers, Bangladesh.

How Male Involvement is addressed by an RHI Project

Working on Power Dynamics between Men and Women

After the Cairo Conference in 1994, thinking about the different roles of women and men with particular reference to reproductive health (RH) has been modified. Male involvement has been recognised as an essential element of any effective plan for RH.

This was the challenge AIDOS picked up within the RHI in launching a project in Nepal with its local partner PHECT (Public Health Concern Trust) NEPAL. The original idea was the creation of an RH community-based counselling centre in Kirtipur, with a main focus on women and girls, conformant with AIDOS' target group. From the exchange with PHECT – which has a more male structured target group – a new combination was conceived. The concept – an integrated counselling centre with a permanent working team composed of medical and paramedical staff, combined with other experts such as a psychologist, a lawyer and a social worker – was modified by including a male counsellor.

The specific dynamics of the team stimulate and enrich each operator via the acquisition of new tools and approaches. Women accessing the centre are involved in this exchange and benefit from the possibilities that such an approach can offer. Likewise men's involvement can become a catalytic element in creating strong returns, if properly managed.

The activities carried out by the project are divided among the counselling centre where women are invited to use the various services offered by the project including relaxation and self-esteem exercises linked to pregnancy and the adjoint Health Information and Service Centre (HISC), especially targeted to men. Once a week the male counsellor meets men in the counselling centre. Some workshops and meetings are directed both to women and men, who are invited to participate in these together.

The male counsellor plays a very important role in all these activities, as it is through him that men are made aware of RH issues, informed about services offered by the project and become comfortable with the idea that RH issues are connected with men's and women's wellbeing and as such need to be shared.

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Project Title: "Establishment of a Centre for Community-Based RH Services and IEC Programmes in Kirtipur Municipality", Implementing Agency: Public Health Concern Trust (PHECT-NEPAL), Executing Agency: Italian Association for Women in Development (AIDOS), http://www.asia-initiative.org/projects_nepal_4.html