Men's Perspectives on Family Planning and Their Knowledge on Reproductive Health

Erkeklerin Aile Planlaması ve Üreme Sağlığı Üzerine Bakış Açıları

Erkekler ve Aile Planlaması / Men and Contraception

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Özet

Amaç: Aile planlamasıyla ilgili kadınlara yönelik çok sayıda eğitim gerçekleştirilmektedir. Bu çalışmamızda erkeklerin aile planlamasına bakış açılarını ve üreme sağlığı üzerine bilgi düzeylerini tespit etmeyi amaçladık. Gereç ve Yöntem: Çalışma kliniğimize gebelik nedeniyle başvuran kadınların eşleri üzerinde anket şeklinde yapılmıştır. Bulgular: Toplam 178 katılımcı anketimizi doldurdu. Katılanların eşlerinin %11,1'inde (17/153) istenmeyen gebelik nedeniyle en az bir gebelik sonlandırılmıştı. Katılımcıların 142'si (%79,8) en az bir modern aile planlaması yöntemi biliyordu ve 104'ü (%58,4) daha önce en az bir modern aile planlaması yöntemi kullanmıştı. Katılımcıların %46,1'i (35/76) tarafından kondom kullanım kolaylığı ve ucuz olması nedeniyle en iyi korunma yöntemi olarak değerlendirildi ve %41,7 (25/60) bundan sonra kondomla korunacağını beyan etti. Katılımcıların %55,6'sı (40/72) yan etkileri nedeniyle hiçbir zaman oral kontraseptif kullanmayacaklarını söylediler. Katılımcılara üreme sağlığıyla ilgili 20 soru soruldu. Tüm soruların yaklaşık %70'i doğru şekilde cevaplandırıldı. Her soru için doğru cevaplanma yüzdesi 39,6 ile 96,1 arasında değişti. Tartışma: Çalışmamızda aile planlaması ve üreme sağlığıyla ilgili evli ve fertil oldukları bilinen erkeklerin bakış açıları değerlendirildi. Bu konularda eğitim programlarının planlanması için çalışmamız başlangıç noktası olarak kabul edilebilir.

Anahtar Kelimeler

Aile Planlaması; Erkek; Üreme Sağlığı

Abstract

Aim: Many training programs for females about contraception have been developed. In this study, we aimed to investigate the perspectives of males on contraception and their knowledge on reproductive health. Material and Method: Husbands of pregnant women who presented in our obstetric clinic were invited to complete a questionnaire. Results: A total of 178 men answered our questionnaire. Among their wives, 11.1% (17/153) terminated their at least one unintended pregnancy. 142 of them (79.8%) knew about modern contraceptive methods, and 104 (58.4%) of them used at least one of these methods. Condoms were perceived as the best contraceptive method for 46.1% (35/76) because of their easiness to use and cheapness, and 41.7% (25/60) of the participants stated that they would like to use condom from then on. 55.6% (40/72) stated that they would never use oral contraceptives because of their possible side effects on their wives. 20 of the questions addressed to the participants were about reproductive health. The participants answered approximately 70% of all questions correctly. The correct answering rate for every question ranged between 39.6% and 96.1%. Discussion: In our study, we investigated attitudes and knowledge about contraception and reproductive health among men who were married and fertile. The findings from this study can provide a foundation for further education programs for men in these areas.

Keywords

Family Planning; Men; Reproductive Health

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Introduction

The World Health Organization declared that 20 million of pregnancies are terminated by unsafe methods for unintended pregnancies, 80 thousand women died and hundred thousands of women faced with complications of unsafe terminations, yearly. For the last 15 years, the unintended pregnancy rates did not change in USA. This shows that reproductive health status have not been optimized yet [1].

Contraceptive metods can be divided into modern methods (hormonal contraceteption, intauterine devices, condom, surgical sterilisation etc) and conventional methods (withdrawal, breastfeeding etc). According to the 2003 data of Turkey, 43% of married couples were using modern methods whereas 29% of them were using conventional methods. Among all couples, 11% were using condoms [2].

For many countries, contraceptive efforts are perceived and served as concerns of women. In developing countries, although it is accepted that contraception is the mutual responsibility of couples, it is thought that women must apply the method. Men must play an active role in deciding to use contraception, choose the suitable contraceptive method, apply the chosen method and participate in the follow-ups of the method if needed. In this way, the availability and use of modern contraceptive methods for women will be easier. The educational level of the couple, the number of healthy children, perspectives of men on ideal family size, ideal birth interval and contraception affect the chosen contraceptive method. Participation of men to contraception must be increased to improve the success of family planning. According to the previous studies in this field, communication between couples increases the use of contraceptive methods [3].

Although the contraceptive technology for men has not developed yet, they have direct and indirect effects on deciding to use contraception. Men's opinions and behaviours on contraception is critical to avoid unintended pregnancies [4]. It was shown in a study that the approval of men increased the use of modern contraceptive methods by their partners [2]. In this study, we aimed to search the perspectives of men with pregnant partners on contraception and develop new education strategies for our community.

Material and Method

The husbands of the patients that are presented to our obstetrics clinic for pregnancy follow-up between February 2012 and April 2012 who accepted to participate in the study were included in this study. A total of 178 men fulfilled the questionnaire. The ethical committee approval was obtained to perform this study. A questionnaire with two parts was given to the participants. The first part was about the demographic characteristics of the couples and perspectives of the participants on contraception. The second part of the questionnaire consisted of 20 questions is on reproductive health with the answers 'yes ', 'no' or 'I don't know'.

While evaluating the data, SPSS 11.0 program was used. Percentage and chi-square tests were used to analyze the data. Regression analysis was also done for evaluating the relationships among the demographic characteristics. $P<0.05$ was defined as statistical significance.

Results

Some characteristic properties of the study group were summarized in table 1. 17 (11.1%) out of 153 participants' wives, had at least one induced aborts because of unintended pregnancy and 23 out of 169 ongoing pregnancies were unintended. 142 (79.8%) out of 178 participants knew about modern contraceptive methods and 104 (58.4%) used at least one of these methods. 35 out of 76 participants stated that the best contraceptive method was condom because of its cheapness and easiness and 25 out of 60 participants (41.7%) were planning to use condom after the ongoing pregnancy. 115 (64.6%) out of 172 participants were thought that contraception was the shared responsibility of couples. Out of 106 participants, 40 (55.6%) said that they would never use oral contraceptives because of their side effects.

Table 1. Some characteristic properities of the study group

		n	%	Total number who answered the question
Education	≤5 years	10	8.7	115
	>5 years	105	91.3	
Income	low	20	11.5	174
	normal-high	154	88.5	
Wife's trimester	1.	39	23.2	168
	2.	62	36.9	
	3.	67	39.9	
Marriage duration	<5 years	107	61.8	173
	≥5 years	66	38.2	
Wife's parity	0	121	68	178
	≥1	57	32	

We failed to find any statistically significant relationship between educational levels, incomes, parity of the women, marriage duration, induced aborts history and knowledge or usage of modern contraceptive methods, favorite contraceptive methods and unwanted contraceptive methods.

The mean correct answer for the questions about reproductive health was 71.07%. Correct results for every question ranged between 39.6% and 96.1%. 'Rapid population size increment causes increased infant mortality' statement was known by 35.8% of 151 participants, 'Reproductive health problems might decrease human life span' statement was known by 42.4% of 151, 'Female mortality rate from breast cancer over 50 years old might be decreased by mammography' statement was known by 57.3% of 150, 'Every mother and baby have the right of a hygienic and atraumatic delivery' statement was known by 96.1% of 153, 'Men might be responsible from infertility as well as women' statement was known by 88.2% of 153, 'The minimum interval between deliveries must be at least 2-3 years' statement was known by 91.7% of 156, 'Excess weight gain during pregnancy is a risk factor' statement was known by 82.7% of 156, 'Smoking during pregnancy might cause adverse effects on fetus' statement was known by 67.8% of 152, 'Low risk pregnancies must be screened 6-7 times by a doctor one of which must be done in the first trimester' statement was known by 84% of 156, 'Maternal exhaustion syndrome might cause low birth weight babies' statement was known by 39.6% of 144, 'Avoiding sexually transmitted diseases is a part of reproductive health care' statement was known by 41.7% of 151, 'All the sexually active women must be screened by pap smear test for cervical carcinoma' statement was known by 85.9% of

149, 'Women must not smoke during pregnancy' statement was known by 94.1% of 153, 'Condom must be used for every unsafe intercourse for avoiding sexually transmitted disease' statement was known by 83% of 153, 'Appropriate weight gain must be achieved during pregnancy ' statement was known by 85.3% of 156, 'Induced abortion for unintended pregnancies must be done in a suitable condition' statement was known by 82.8% of 151, 'Induced abortion is not a contraceptive method' statement was known by 85.3% of 156, 'Breast examination is a part of reproductive health' statement was known by 55.6% of 153, 'The doctor must not be the decision maker for contraceptive method choise' statement was known by 51% of 155 and 'Doctors must give instructions at every possible opportunity' statement was known by 80.8% of 156 participants.

Discussion

Among 178 participants, 142 (79.8%) knew at least one modern contraception method. This means that we must increase the education programs for men about contraception. Taking into account the fact that wives of these men are pregnant, this group must be instructed for modern contraceptive methods as soon as possible in order to increase the interval between pregnancies for the next pregnancy. The use of modern contraceptive methods by women increased when their partners approved their use [2]. Men's participation in family planning is important for its success. Except for male condom and retrieval, nearly all contraceptive methods are applied by women [5]. Some factors increasing the success of contraception are shared responsibility between couples, the easiness, safety, efficacy and accessibility of the method [6]. In a study from Turkey, it was shown that more than half of the men using contraception were using condoms and nearly all the condom users were satisfied with his method [7]. In our study, the majority of the participants had used condom before, were satisfied with condom and were planning to use condom in the future. In patriarchal (male-dominant) populations, the rate of condom use is low [8]. In spite of this, relatively high rates of condom use can be attributed to the factors such as easy access and cheapness of it, no known adverse effects and relatively well-presentation of condom while informing the community on sexually transmitted diseases formerly. 115 participants out of 178 (64.6%) replied as contraception is the shared responsibility of the couple. In a study carried out in the USA in 1976, 78% of male participants replied that contraception was the shared responsibility of the couple [9]. Similarly, in a previous study from Turkey, half of the participating men replied that contraception was the shared responsibility of the couple [6].

In the current study, we failed to show a relationship between the educational levels, levels of income and contraceptive methods. We did not conduct the questionnaire using face-to-face method. The participants filled out the questionnaires themselves. Therefore, some questions were not answered by some of them. This failure might be because of the relative small sample size for some questions.

For the questions about healthy places for labor, male infertility, healthy delivery interval, excess weight gain during pregnancy, pregnancy follow-up, smear, smoking during pregnancy, the relationship between condom usage and sexually transmitted diseases, induced abortion for unintended pregnancies, the fact that induced abortion is not a contraceptive method and doctors duty of instructing about contraception, the participants gave the correct answers above 80%. Adequate knowledge level was reached by the participants on the previous subjects. However, the questions about the relationship between the infant mortality rate and rapid increment of population size, mammography and breast examination, the content of reproductive health, maternal exhaustion syndrome, side effects of smoking on fetus, while deciding contraception method doctor's and couple's responsibilities were relatively poorly answered by the participants. The knowledge of the community about those subjects must be increased by giving education.

In a previous study it was shown that nearly all men participated in the study trusted in contraception, more than half of them were given information about the subject and written or visual publications and doctors were preferred as sources of information [6].

Previous studies recommended education programs on contraception for single and adolescent males [6].

Bozkurt et al. [10] evaluated the knowledge of the pregnant on sexually transmitted diseases and found out that they were not sufficiently informed of these diseases. The authors recommended that they should be given education on this subject. Not only pregnant women but also their partners must be instructed on reproductive health and contraception. By only this way, the accessibility and continuity of these health care services can be supplied successfully.

The inaccurate knowledge of the medical staff on contraception decreases the quality of the consultation dramatically and results in unintended pregnancies [11]. Unfortunately, 14% of the patients that applies for induced abortion for unintended pregnancies conceived because of inefficient or incorrect contraception as a result of either communication failure or misunderstanding on consultation [12]. Therefore, not only couples but also the medical staff must be duly instructed on contraception. We recommend well-designed instruction programs for our community, particularly for risky population like our participants and for the medical staff. In this way, we can decrease the unintended pregnancies and improve the reproductive health of the community.

Competing interests

The authors declare that they have no competing interests.

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