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MALE PARTICIPATION IN ACCEPTANCE OF FAMILY PLANNING METHODS

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Abstract

Background: Family planning programmes have always been focused on the female counterpart. This has led to the perception that family planning is largely a woman's business, with the man having a negligible role. Given the degree of male domination in Indian society, involving them and obtaining their support to the cause, family planning is of prime importance in our country. This study was conducted to assess the level of male participation in family planning in the population of urban slums of Kanpur city.

Material and Methods: This cross-sectional study involved one urban slum of Kanpur selected by simple random sampling technique. All the 185 eligible couples residing in the study area were interviewed after obtaining the informed consent. A pre-designed and pre-tested questionnaire was used as the study tool.

Results: Women had greater knowledge of OCPs(97.9%) and Copper T(86.2%) as compared to men who knew barrier methods(97.8%).The couple protection rate was 36.8%. About 23.8% were using spacing methods whereas 12.9% were using terminal methods. Men showed greater preference towards adoption of family planning methods by females such as OCPs(97.8%), Copper T(96.7%) and tubectomy(73.6%). Vasectomy was the least preferred method of family planning (2.2%) among males. Husband (73%) was the decision maker for adoption of family planning methods in majority of the households. The decision regarding number of children was made by husband in most of cases (48.1%) followed by in-laws(43.2%).

Conclusion: Male domination was evident in decision making regarding family planning and number of children in the family. Therefore, family planning measures must be directed towards the male counterpart to make them more effective.

Key words: Male participation, family planning methods

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Introduction:

India pioneered the launch of a national family planning programme in 1952, emphasizing the extent necessary for reducing birth rates "to stabilize the population at a level consistent with the requirement of national economy".¹ The current national average for couple protection rate is 40.4%

and state average for Uttar Pradesh is 27.7%.² It is a long road down to meet the target of achieving a couple protection rate of 60% in order to have a population at replacement level. It has been quoted that "Changes in men's and women's knowledge, attitudes and behaviour are necessary conditions for achieving the harmonious partnership of men and

women. Men play a key role in bringing about gender equality since, in most societies, men exercise preponderant power in nearly every sphere of life. It is essential to improve communication between men and women on issues of sexuality and reproductive health, and the understanding of their joint responsibilities, so that men and women are equal partners in public and private life".³ The target of all family planning programmes have always been the female counterpart. This has led to reinforce the belief that family planning is largely a woman's business, with the man playing a very peripheral role. Given the elevated position to men in Indian society involving them and obtaining their support and commitment to family planning is of crucial importance in our country. Most decisions that affect family life are made by men. Most decisions that affect political life are made by men. Men hold positions of leadership and influence from the family unit right through the national level. The involvement of men in family planning would therefore not only ease the responsibility borne by women in terms of decision-making for family-planning matters, but would also accelerate the understanding and practice of family planning in general. Given the male domination in the Indian society, involvement of males in family planning is a pre-requisite for the success of any family planning programme, therefore this study was planned in order to assess the level of male participation in family planning.

Material and methods:

It was a community based cross-sectional study. The study was carried out from July 2014 to December 2014. Ethical committee clearance was obtained from the institutional ethical committee. The study included one urban slum which was selected by simple random sampling technique from a list of all urban slums of Kanpur city. All the 185 eligible couples residing in the study area were

interviewed after obtaining the informed consent. A pre-designed and pre-tested questionnaire was used as the study tool to elicit the required information from the study subjects. Data was compiled using Microsoft Excel and analysed using SPSS 17.0. Percentages were used to study the difference between categorical variables.

Results:

In the present study, 185 subjects were interviewed, 91 males and 94 females. Women had greater knowledge of OCPs (97.9%) and Copper T (86.2%) as compared to men whereas men were better informed about barrier methods (97.8%). [Table 1] The present study observed that the couple protection rate of the study subjects residing in the urban slums of Kanpur city was 36.8%. Among the various contraceptive methods practiced among the study subjects, 23.8% were using spacing methods whereas 12.9% were using terminal methods. Majority(13.5%) were using barrier methods followed by OCP's (5.4%) and Copper-T (4.9%) whereas among the terminal methods it was observed that tubectomy was more prevalent (11.4%) as compared to vasectomy (1.6%). [Table 2] Men showed greater preference towards adoption of family planning methods by females such as OCPs(97.8%), Copper T(96.7%) and tubectomy(73.6%), whereas women were more inclined towards use of barrier methods(96.8%), followed by copper T(83%), tubectomy(73.4%), OCPs(47.9%) and vasectomy. Among males, vasectomy was the least preferred method of family planning (2.2%). Husband (73%) was the decision maker for family planning methods in majority of the households, followed by combined decision making by both husband and wife(14.1%).[Table 3] Among barriers to adoption of family planning methods, family pressure for male child (66.5%) was the most common followed by social stigma (50.8%). Majority of the couples preferred one male

child(42.2%) followed by one male and one female(25.4%).The decision regarding number of children in the family was made by husband in most cases(48.1%), followed by in-laws(43.2%). [Table 4]

Table 1: Knowledge of contraceptive methods among eligible couples

Contraceptive methods	Men(n=91)		Women(n=94)	
	No.	%	No.	%
Spacing Methods				
Oral Contraceptive Pills	75	82.4	92	97.9
Copper T	65	71.4	81	86.2
Barrier methods	89	97.8	87	92.6
Terminal Methods				
Vasectomy	45	49.5	12	12.8
Tubectomy	8	8.8	21	22.3

Table 2: Prevalence of contraceptive practices among study subjects

Spacing methods	Number	Percentage
Oral Contraceptive Pills	10	5.4
Copper T	9	4.9
Barrier methods	25	13.5
Total	44	23.8
Terminal methods		
Vasectomy	3	1.6
Tubectomy	21	11.4
Total	24	12.9
Couple Protection Rate	68	36.8

Table 3: Preference of contraceptive methods among eligible couples

Contraceptive methods	Men(n=91)		Women(n=94)	
	No.	%	No.	%
Spacing Methods				
OCP	89	97.8	45	47.9
CuT	88	96.7	78	83.0
Barrier methods	23	25.3	91	96.8
Terminal methods				
Vasectomy	2	2.2	43	45.7
Tubectomy	67	73.6	69	73.4

Table 4: Social aspects of family planning behaviour

Social aspects	No.(n=185)	%
Decision making about using contraception		
Husband	135	73.0
Wife	21	11.4
Both	26	14.1
In laws	3	1.6
Reason for not using family planning methods		
Social stigma	94	50.8
Family pressure for male child	123	66.5
Side effects	65	35.1
Lack of knowledge	4	2.2
Lack of Affordability	42	22.7
Lack of Availability	35	18.9
Preferred no. of children in the family		
One Male	78	42.2
One Female	2	1.1
One male one female	47	25.4
At least 2 males	35	18.9
More than 2 children	23	12.4

Discussion:

In present study it was observed that though the knowledge about any method of contraception was high as compare to the practice, this same phenomenon of gap between knowledge and practice has been observed in various studies conducted nationally and internationally.Makade etal, Cnwuzurike et al, chopra et al, Reddy etal, Mao et al, Basu et al also observed the same.⁴⁻⁹

Knowledge of contraceptive methods

In the present study it was found that most of the men had the knowledge of one or more than one contraceptive methods. Knowledge on spacing method of contraception was high as compare to that of terminal methods. Among spacing methods most of the men identified condoms (97.8%) followed by OCPs (82.4%) and IUCDs (71.4%).among terminal methods the knowledge of vasectomy(45%) was maximum followed by tubectomy(8%). This is similar to the findings of

study done by Pathi S et al.¹⁰ In a KAP study conducted by Jayalaxmi et al on contraceptive practices found that the knowledge about female sterilization (62.2%) was maximum among men followed by IUCDs (61.5%), OCPs (49%), condom (39.8%) and vasectomy (28.2%).¹¹ However, in a study done in Ethiopia by Adelekan et al found that 100% of the respondents identified condoms as method of contraception followed by oral pills (90%), IUDs(64%) whereas only 2% of them identified female sterilization as method of contraception.¹²

Prevalence of various contraceptive methods

The present study observed that the couple protection rate of the study subjects residing in the urban slums of Kanpur city was 36.8%. National average 40.4% and state average for Uttar Pradesh is 27.7%.³ In the present study among the various contraceptive methods practiced by the study subjects, 23.8% were using spacing methods whereas 12.9% were using terminal methods. Majority(13.5%) were using barrier methods followed by OCP's (5.4%) and Copper-T (4.9%) whereas among the terminal methods it was observed that tubectomy was more prevalent (11.4%) as compared to vasectomy (1.6%). Similar pattern of contraceptive practice was observed by Bhasin et al in their study conducted in Eastern Delhi where condom was the most common method (33.4%) followed by tubectomy (27.3%), OCPs (16.6%) and IUCDs (15.7%).¹³ Similarly a study conducted by Makade KG et al., in urban slums of Mumbai observed that the practice of spacing methods was higher as compared to termination method, 11.98% of females had undergone tubectomy among the spacing methods use of OCPs (28.1%) was higher as compare to condom (18.4%) and IUDs (9.9%).⁴ Contradictory to the finding of present study, Benny PV et al., in Kerala observed that the practice of terminal method of contraception was high as compare to spacing

methods, 58.5% had undergone sterilization while 5.9% were using condoms and rest of them using other different methods.¹⁴ In another study conducted by Kansal A et al in rural area of Dehradun district tubectomy (28.88%) was the most preferred method of contraception and among spacing methods condoms, OCPs, IUDs were used by 11.68%, 4.78% and 1.71% of couples respectively, while only 1.98% of males had undergone vasectomy which is similar to our study.¹⁵

Preference of various contraceptive measures

Men showed greater preference towards adoption of family planning methods by females such as OCPs, Copper T and tubectomy, whereas women were more inclined towards use of barrier methods, followed by copper T, tubectomy, OCPs and vasectomy. Among males, vasectomy was the least preferred method of family planning (2.2%). Similarly in a study done by Jayalaxmi MS et al., in Delhi observed that 53.4 per cent of the men preferred to use some modern spacing methods (Copper T 26.7%, Condom 25% and Oral Pills 1.7%). However, 28.3 per cent preferred termination method of contraception.¹¹ However In a study done by Makade KG et al females were inclined towards IUCDs (59.1%) as preferred method of contraception followed by OCPs (36%), tubectomy (26.9%), condoms (21.9%) and vasectomy (3.5%).⁴

Majority of the females (37.5%) preferred oral contraceptive pills followed by male condom (22.1%). Sherpa et al.¹⁶

Social aspects of family planning behaviour

It was observed that though the male respondents had fair knowledge about contraception but the gap still exist for practice the main reason for not using family planning practice was family pressure for male child (66.5%) followed by social stigma (50.8%), side effects(35.1%), lack of affordability(22.7%), lack of availability(18.9%)

and lack of knowledge (2.2%).similar findings were observed in a study done by Jayalaxami et al where male respondents also agreed to the fact for not using family planning methods was strong preference for male child.¹¹ In the present study it was found that the decision regarding use of contraception was made primarily by the husband (73%) followed by both husband and wife (14%), wife (11%) and in only 1.6% respondents in laws took the decision, contradictory to this findings Makade et al observed in their study that (41.45%) of respondents took mutual decision regarding contraception followed by husband (30.77%), wife (26%) and in laws (1.7%).⁴

Conclusion:

Male domination was evident in decision making regarding family planning and number of children in the family. Therefore, family planning measures must be directed towards the male counterpart to make them more effective.

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