

**MEN'S KNOWLEDGE, APPROVAL AND INTERSPOUSAL
COMMUNICATION ON FAMILY PLANNING AS
CORRELATES OF THEIR PARTICIPATION IN
REPRODUCTIVE DECISION MAKING**

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Abstract: *This study involved personal interview of 320 married men to determine their knowledge about family planning (FP), approval of FP, interspousal communication, and number of children ever born, and the relationship of these factors to men's participation in reproductive decision-making. The data showed that the men were knowledgeable about FP, but many still have misconceptions about it. Most of them approved of FP use and they discussed FP concerns with their spouses, but rarely. Number of children was found to be significantly associated with interspousal communication and participation in reproductive decision-making. Decision-making participation was significantly correlated with men's knowledge about FP, FP approval, and interspousal communication.*

Introduction

Traditionally, Family Planning (FP) programs are focused on women as the primary beneficiaries of services. Men have always taken the backseat in most FP endeavors. Likewise, most FP studies are centered on women only. Although the need for shared responsibility in reproductive decisions and the importance of male involvement in FP programs have long been recognized, men's involvement in FP programs still leaves much to be desired.

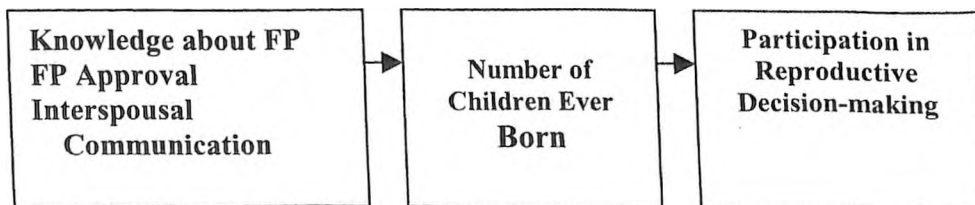
Filipino men are known to be the dominant decision makers in the family, however, their actual role in making reproductive decisions is not yet well documented. It would be interesting to know about men's knowledge about FP, approval of FP and their interspousal communication are related to men's participation in reproductive motivation and family size preferences. There is a need for programs targeting men which are designed to change their attitude on population matters and motivate them and their wives to produce smaller families. It is hoped that this study can elicit data helpful in designing programs for improving male participation/involvement in FP.

Objectives of the Study

This study aimed to determine men's knowledge about FP, approval of FP, interspousal communication, and number of children, and to determine whether these factors are related to their participation in reproductive decision making. It also determined if the relationship between men's participation in reproductive decision making and knowledge about FP, approval of FP and extent of interspousal communication is affected when number of children is controlled.

Theoretical and Conceptual Framework

Parson's Theory of Action (Parson, 1937) served as the framework of this study. The theory points out the importance of the individual "orientational scheme," such as cognitive modes of orientation, value orientation, cultural orientation, and communication in achieving/ attainment of goal. Men's different modes of orientation is assumed to influence their response to FP endeavors. Their knowledge about FP which they may have gained mass media, seminars/lectures, and interaction with others may affect their attitudes and eventually their participation in reproductive decision-making. If they have favorable attitudes towards FP, they can openly talk about it with their wives and together they can make responsible reproductive decisions. This sharing may lead improve fertility goals. Figure 1 presents the assumed flow of relationships among variables of the study.



Independent Variable Intervening Variable Dependent variable
Figure 1. Assumed Flow of Relationship Among the Major Variables

which is lower than the 1997 Region VI poverty threshold of P10,560. Nearly half of them (49.38 %) reported a monthly income of P2,500 or below (Table 1).

Table 1. Distribution of Respondents According to Certain Characteristics

Characteristics	Number	%
Mean Age=	37.29	
<u>Religion</u>		
Roman Catholic	297	92.8
Non-Roman Catholic	23	7.2
Total	320	100.00
<u>Educational Attainment</u>		
Elementary or lower	83	25.9
High School/Vocational	132	41.3
College and above	105	32.8
Total	320	100.00
Mean Monthly Income = P3,766.00		

Men's Knowledge about Family Planning

A big majority of the men were aware of what FP is (80.0 %), where they can avail of FP services (94.4 %) and why couples should practice FP (81.9 %). Table 2 shows that most of the men were also familiar with the female and male-oriented FP methods and those which require surgery (84.40 %, 93.80 %, 95.00 %, respectively). Only a few mentioned side-effects of condom and vasectomy (5.9 % and 4.7 %, respectively), but most knew of the side effects of pills. On the whole, the men had an "average" knowledge about FP.

Information about FP was obtained from varied sources, the most common of which were health professionals (90.94 %).

Table 2. Distribution of Respondents According to Knowledge About Family Planning, and their Sources of FP Information

Items about FP	No. of Respondents with correct answers (n=320)	%
FP Awareness		
What FP is	256	80.0
Where they can avail FP services	302	94.4
Why couples should practice FP	262	81.9
FP Methods		
Male-oriented methods	283	88.4
Female-oriented methods	300	93.8
Methods requiring surgery	304	95.0
Side Effects		
Side effects of condom	19	5.9
Side effects of pills	277	86.6
Side effects of vasectomy	15	4.7
Level of Knowledge		
High (9 – 12)	164	51.2
Average (5 – 8)	146	45.6
Low (1 – 4)	10	3.1
Mean =	8.42	
Most common source of Information about FP		
Health Professionals (nurses, midwives,	291	90.9

Men's Approval of FP Practice

Most of the men approved of FP practice. Except for 4.4 % who were "neutral" position and 1.6 % who "disapproved" of FP, the rest (94 %) approved of FP practice (47.5 % "strongly approved" and 46.5 % "approved"). The mean FP approval score was 8.35, which is equivalent to "approve" category (Table 2). This observation does not support the common belief that husbands hinder their wives' practice family planning. This suggests that positive attitude towards FP does not necessarily translate to FP practice.

Table 2. Distribution of Men According to Approval of Family Planning

Approval	Number	%
Strongly Approve (9 – 10)	152	47.5
Approve (7 – 8)	149	46.5
Neutral (5 – 6)	14	4.4
Disapprove (3 – 4)	5	1.6
Total	320	100.00
Mean	8.35	

Interspousal Communication About Family Planning

Table 3 shows that four in every five (83.8 %) of the men discussed FP concerns with their wives. Nearly half (46.6 %) engaged in a discussion about FP with their wives only once, the week before the interview, while 48.9 % did it twice. The most common topics discussed by couples pertained to number of children they want to have (47.4%) and the side effects of FP (34.3%). FP methods was a subject talked about by about a quarter (23.1 %) of the men.

Number of Children Ever Born

On the average, the men had 3.7 children ever born. The data show that one in three (35.6 %) had three or four children and about the same proportion (31.6 %) had only one or two. The data reflect the regional and national averages (NSCB, 1998). The number is also consistent with the findings of a provincial study on health indicators (David and Vencer, 1998).

Table 3. Distribution of men According to Interspousal Communication About Family Planning

Interspousal Communication	Number	%
Men Who Discussed FP with spouse:	268	83.75
Frequency of Discussion		
Three times or more		
Two times	12	4.5
Once	131	48.9
	125	46.6
Topics Discussed (Multiple Response):		
FP Methods	62	23.1
Side effects of Contraceptives	92	34.3
Who will practice family planning	28	10.4
Number of children	127	47.4
Number of Children Ever Born		
5 or more	93	29.0
3 - 4	114	35.6
1 - 2	101	31.6
0	12	3.8
Total		
Mean = 3.6		

Men's Participation in Reproductive Decision-Making

A great majority (94.2 %) of the men claimed that they have the most influence in family decisions. Only a few (3.4 %) acknowledged joint husband-wife on family decisions, while only 2.2 % admitted that it is their wife who

has the most influence in the family. The data (Table 4) confirm the general belief that husbands, being the authority in the family are the main decision-maker.

The decision on the number of children was reported by 90.62 % of the respondents as a joint husband-wife endeavor. Abanihe (1994) made the same observation among Nigerian men and women.

Whether or not to practice family is another reproductive matter which was decided jointly by the husband and the wife in Leganes (89.4 %). Only 6.2 % of the men reported that they independently decided on this matter, while 4.4 % reported that it is their wives alone who decided on this. The same pattern was found by David (1996) in her study of participation in decision-making among faculty members in selected educational institutions in Iloilo City..

Table 4. Distribution of Respondents According to Participation In Reproductive Decision-Making

Participation in Decision-Making	Number	%
<u>Who influences family planning decision most?</u>		
Husband only	301	94.1
Wife only	7	2.2
Joint husband and wife	11	3.4
Parents/Relatives	1	0.3
Total	320	100.00
<u>Who decides on the no. of children?</u>		
Husband only	27	8.4
Wife only	3	0.9
Joint husband and wife	290	90.6
Total	320	100.00
<u>Who makes the decision on the use of FP method?</u>		
Husband only	20	6.2
Wife only	14	4.4
Joint husband and wife	286	89.4
Total	320	100.00

Relational Analysis

Number of Children and Knowledge about FP.

The data show that knowledge about FP was not significantly correlated with number of children ever born. The correlation coefficient ($r=.09$) shows a very negligible relationship between the two variables and did not reach a statistically significant level. This means that men's knowledge about FP has no significant bearing on their number of children. The data fails to support the hypothesis that the more knowledgeable the men are about FP, the fewer their children. This findings confirm the findings of Mbizvo and Adamchak (1991) in Zimbabwe where men's knowledge about FP did not lead them to limit the number of their children.

Number of Children and Men's Approval of FP.

The Pearson's r of -0.09 between number of children and men's approval of FP is negligible and is not significant at .05 level. This means that number of children ever born to couples cannot be attributed to the men's approval of FP. David (1996, p.80) made the same observation among MWRA's in Iloilo. This finding supports Parson's Theory of Action. Even if one strongly approves of FP, if his/her normative orientation encourages only three children, chances are he/she will desire to have only three.

Number of Children Ever Born and Interspousal Communication.

The significant correlation coefficient of $r=0.15$ between number of children ever born and frequency of interspousal communication on FP indicates that interspousal communication positively influences the number of children couples have. This means that men who discussed FP more often with their wives tended to have fewer children than those who discussed FP less frequently with their wives. This corroborates the findings of Biddlecom (1994) that the more often husband and wives discussed FP and fertility preferences, the more they share similar views on those topics and had lower family size goals. The data also confirm that interspousal communication plays a key role in reproductive health. It was noted however, that discussions between spouses are usually initiated by husbands.

Table 5. Results of Tests of Association between Number of Children and Men's Knowledge about FP, their Approval of FP, Interspousal Communication and Decision-making Participation

Factors Related to No. of Children Ever Born	Test of Correlation/Association
Knowledge about FP	$r = 0.09$ not significant
Approval of FP	$r = 0.09$ not significant
Interspousal Communication	$r = 0.15$ significant at .05 level
Extent of Decision-making Participation	$r = 0.12$ significant at .05 level

Knowledge about FP and Participation in Reproductive Decision-Making.

The Pearson r result for the association test between number of children and participation in reproductive decision-making (0.12) is significant at .05 level. This means that the higher the respondents' level of knowledge about family planning, the more likely that they will participate in reproductive decision-making. These findings sustain to some extent, "Parson's Theory of Action," which states that an individual has a choice of alternatives within the limits of the situation. A high level of knowledge about FP may lead one to get involved in reproductive decision-making. This also supports the finding of a study done in Pakistan that better educated men participated in reproductive decision-making to limit their number of children.

Approval of Family Planning and Participation in Reproductive Decision-Making.

The study also shows a significant association between men's approval of FP and their decision-making participation, the Cramer's $V = 0.19$ being significant at 0.05 level. The married men who approve of family planning practice considered their wives as equal partners in reproductive decision-making and were more likely to make decisions jointly with their spouses.

Interspousal Communication and Men's Participation in Reproductive Decision-Making.

Participation in reproductive decision-making was also found to be significantly associated with inter-spousal communication. This is confirmed by a low but significant Cramer's V value of 0.12. This suggests that participation in

reproductive decision-making is dependent on the degree or frequency of interspousal communication. Roudi and Ashford (1996) reported that 90 % of husbands and 80 % of wives acknowledged that husband have more influence on family decision than wives and men are considered to be the prime decision maker in deciding whether to practice FP or to have another child.

Number of Children and Decision-Making Participation

Decision-making participation was found to be independent of the number of children the couple has. This is indicated by a Cramer's V value of 0.08 which is not significant at .05 level (Table 6). This means that regardless of the number of children ever born in the family, the husband remains actively involved in reproductive decision-making. The data confirm the husband's great influence in reproductive decisions, which was also reported by earlier studies on decision-making patterns (David, 1996; David, Chin and Herradura 1998).

Table 6. Results of Tests of Association Between Men's Participation in Decision-making and their Knowledge about FP, Approval of FP and Interspousal communication

Independent Variables	Association Test Results
Knowledge about FP	Cramer's V = 0.15*
Approval of FP	Cramer's V = 0.19*
Interspousal Communication	Cramer's V = 0.12*
Number of Children ever born	Cramer's V = 0.08 ns

*Significant at .05 level

ns=not significant at .05 level

Conclusions and Recommendations

Married men in the Municipality of Leganes are well informed about FP and the different FP methods, but they still have misconceptions about FP practice. The more knowledgeable about FP the men are, the more involved they are in reproductive decision-making. The men's opinions influenced their wives' decisions.

Men's level of knowledge about FP is not significantly related to their number of children. This fails to support the hypothesis that number of children is dependent on the men's level of FP knowledge. Men who approved of FP practice tended to participate actively in reproductive decision-making. David's (1996) conclusion that Filipino families are more "egalitarian than patriarchal" gains support from this study.

Parson's theory of action finds support in this study. The men's participation in reproductive decision-making and their desired number of children are evidences of their normative orientation. On the other hand, the changes in participation in reproductive decision-making and desired number of children can be possible effects of the social, psychological, and cultural influences that act as barriers to contraceptive practice among men.

Considering the significant findings of the study, program implementers should design more rigid and comprehensive information, education, communication and service delivery activities directed to young married men in the form of seminars, workshops and lectures.

Promotive materials such as leaflets, posters and brochures must be available to both government and non-government clinics for use since these are the most popular sources of information. FP counselors of both government and non-government agencies must involve not only women but also men. The government's pre-marriage counseling programs must include discussions not only on men's and women's marital responsibilities but also responsibilities for parenting and promoting child quality over quantity.

Further research is needed to investigate the relationship between men's approval of specific male methods, such as condom or vasectomy and personal variables as well as fertility variables.

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