

**Introduction:** In patriarchal societies such as Nigeria, contemporary relation between men and women within and outside the family find women subordinate to men in a myriad of ways, especially on issues about family planning, pregnancy and abortion. In this regard, specific reproduction related decisions must be seen in the light of women's circumstances at the time of the decision. Thus, the decision whether to terminate a pregnancy is related to a woman's situation once she becomes pregnant.

In Nigeria, abortion is illegal unless if medically certified as a threat to the life of the intending mother. Available data confirm that unsafe abortion accounts for more than fifty percent of maternal morbidity and mortality are due to unsafe abortion. Men in Africa play an important role in most decisions pertaining to family life, including family size and fertility control. A number of cultural and institutional factors favour African men in matters related to fertility and fertility control- the social and economic dependence of wives on their husbands (Isiugo-Abanihe, 1994), religion and socio-cultural issues. The role of men is of paramount determinant in unsafe abortion decision making.

The objective of the paper is to examine the characteristics of male partners at vital stages of the abortion decision process. This include the correlates of male partners in declaring pregnancy status as unwanted, identifying abortion methods, payment for abortion costs and prevention of unwanted pregnancy through the use of family planning and contraceptive methods.

**Methods and Findings:** We explore data from 151 respondents (71 women and 80 men) to correlate male partners' involvement in abortion decision processes. Important significant variables to male partners' on their reaction to status of pregnancy as "unwanted pregnancy" shows that, 75.0% among them were above 30 years of age. Among male who advised and suggested induced abortion as the final resolution of unwanted pregnancy, more than 57 % were in the age group 30 years and above.

Concerning the abortifacients employed, 25.6% of those that reported dilation and curettage among the married male respondents are below 30 years while 74.4% were above 30 years. All those that reported to have self-medication are below 30 years while all those that went to procure abortion from traditionalist are above 30 years. Among the unmarried male respondents, 95.7% of those that reported to have induced abortion through dilation and curettage are below 30 years. All those that reported to have self medicated or consulted traditionalist were below 30 years. Responses for persons responsible for the payment of abortion cost show that among married males, 30.8% of those that reported male partners as being responsible for abortion payment are below 30 years, while, 69.2% are above 30 years. All those that

reported female partners and others (friends and family) as being responsible for abortion payment are 30 years and above. Among the unmarried category, 96% of those that reported male partners as being responsible for abortion payment are below 30 years, 87.5% of those that reported the female partner concerned as being responsible are also below 30 years. All those that reported friends, family and others are all below 30 years.

On the reasons for the preference of the choice of abortifacients, 29.2% of those that made their choice based on safety of the abortifacient among the married male category are in the age group below 30 years, while 70.8% are in the age group 30 years and above. Also, 17.6% of those that made their choice on economic reason are in the age group below 30 years. The distribution among the married male category shows that majority of those that made their choice based on a particular reason are in the age group 30 years and above. Among the unmarried male respondents, all responses to reasons for the choice of abortifacient favour those in the age group below 30 years.

In all responses and variables considered based on the age of male respondents as at the time they were faced with unwanted pregnancy, it suggests the importance of these two broad age groups (below 30 years among unmarried and above 30 years among the married) to the prevalence of unwanted pregnancy, role played during the pregnancy and abortion-decision making.

Considering the education of male partners to correlates of abortion decision making, majority of male respondents that claimed to have been faced with unwanted pregnancies had tertiary education (73.9% among married and 59.5% among the unmarried). Respondents with higher education (tertiary) respond in higher proportion for reason pregnancies were unwanted. On their reaction to the unwanted pregnancy, majority of the proportion of those that were angry and seek for abortion among both married and unmarried male respondents had tertiary education, majority of those that accepted responsibility and did not seek for abortion had low education (both married and unmarried category). All those that reported to have reacted indifferently to the pregnancy or 'ran away and denied responsibility' had tertiary education, while among the unmarried category, it was 33.3% among those with post-primary education and 66.7% among those with tertiary education. Majority (76.2% among married and 76.3 among unmarried male) of those that reportedly resolved the pregnancies through induced abortion had university education.

Majority of male respondents that claimed they pay for the abortion charges had tertiary education (81.3% among married and 67.0% among unmarried). The distribution is similar for those that claimed the female partner was responsible for payment of abortion charges (61.5% among married and 77.5% among the unmarried). On the reasons for

the choice of abortifacient, majority of the proportion for both cases on all reasons had tertiary education.

The distribution according to education for selected responses for both categories of married and unmarried male respondents was tertiary education biased. Education of male partner especially tertiary education is significant to all responses, except for those that reacted positively and accepted responsibility.

On income of Male partners, there is no regular association between level of income of male partner and their reaction to unwanted pregnancy. Middle income earners also reportedly had the highest proportion among those that advised female partners to resolve the pregnancy through dilation and Curettage (46.6% among married and 48.5% among the unmarried), while those that suggested to female partners to patronize chemist and drug stores had the highest frequency among those that earn below N5000 (86.2% among married and 75.0% among the unmarried). There is no regular pattern of association between abortion costs and male partners' level of income. On the payment of abortion cost, middle incomers had the highest proportion among the married male partners that paid abortion charges. Among the unmarried, the highest proportion of males that pay for abortion charges are of high income level. Majority recommended abortion method for their partner because it is "safe" (57.8%). Majority of those that recommended because it is economical are low income earners (30.0%), while, majority of those that considered the effectiveness of the abortion method are high income earners (12.9%) while those that recommended based on the female partner's insistence are low income earners. The analysis revealed that their level of income considering the safety, effectiveness and cost of the abortion methods influences the consideration of abortifacients for female partners by men.

The important predictor variables of male partners in identifying and introducing their partners to abortionist and abortion methods were analyzed using logistic model. The variables analyzed include the age of male partners, education, income level and religion. The characteristics of women who reported that the male partners introduced them to abortionist/ abortion methods were also presented.

The logistic multivariate analysis for the reported male partners revealed that there is a positive relationship between the young age (below 30 years) and reported male partners' identifying and recommending of abortionist for all categories except for the unmarried female category. Male partners in the age group less than 30 years are more likely to recommend abortion method to their female partners than older age group for all categories except for the unmarried female. Age group below 30years is a significant important predictor for male partner identifying abortionist for married female and unmarried male ( $p < 0.05$ ).

Considering education level of male partners, the variable shows no statistical significance to male partner identifying abortionist for all categories. There is a negative relationship for the married male and unmarried female at low levels of education to reporting of male partners' identifying abortionist. The relationship is positive for the married females and unmarried males. Unmarried males of low levels of education are twice more likely to be responsible for recommending abortifacients. Also, married females of low levels of education are more likely to mention male partners as being responsible for identifying and recommending abortifacients.

Income is a significant predictor variable for those at lower income ( $p < 0.05$ ) to male partners' identifying abortionist for all the categories across marital status except for married females. Unmarried category are more likely to implicate male partners as identifying abortionist (1.2 times more likely for male and 2.2 times more likely for females) than those in the high income levels. For the married category, there is a negative relationship between the low levels of income of men to identifying or recommending abortifacients and also for low levels of income of women. Although, low levels of income of male partner is a significant predictor variable, the distribution shows that men with low level of income are less likely to be responsible for identifying abortionist.

Across the middle income earners, the variable is significant to male partners identifying abortionist for married men and unmarried females ( $p < 0.05$ ), and also, significant for unmarried male ( $p < 0.1$ ). There is a positive relationship between middle income levels and male partners identifying and recommending abortionist for all categories except for married women. Married and unmarried men with middle income are twice more likely to be responsible for identifying and recommending abortifacients than those in the high-income category. Also unmarried women with middle income level are thrice more likely to implicate male partners as being responsible for identifying abortionist.

The analyses of the correlates of male partners who are responsible for the payment of abortion cost were presented. Correlates of men characteristics in abortion payment and the characteristics of women who implicated their male partners as been responsible for abortion payment were presented.