

Males Involvement in the Reproductive and Child Health Issues in the Slum Areas of Delhi

By

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Introduction

Attention is required on the men's rights and responsibilities for enhancing the male involvement especially in the socially and economically backward countries. Gender is not just about either men or women but it is about the relationship between men and women and about their roles and expectations. These unequal relationships are mainly influenced within the family, religion, caste, culture, media, school and work.

Men have multiple roles to play in the reproductive health as sexual partners, husbands, fathers, family and household members, community leaders and gatekeepers to health information and services. Wherever their positive involvement is higher, like inter-spousal discussion on family size and what family planning methods to be used, there is an effective use of contraception and following up of ideal spacing of children. Wherever males' participation is woefully negligible, unmet demand for contraception is higher. Men's involvement helps to support women's contraception choices, increase communication between partners, increase male methods of contraception and improve the positive behaviour for the prevention of STDs.

It can be said that improved communication regarding reproductive goals between partners is the function of positive male participation. In addition, men play an important role in deciding to about the pregnancy. A majority of the women consult their spouse before reaching decision. Men usually take decision on which centre for abortion and accompany women during abortion. Men play a major role in women's decision to accept and select the family planning method and act as a motivator. In a nutshell, it is understood that men play a dual role as supporting 'partners' of women and clients.

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However, these roles were not properly captured over the years in the developing countries, especially in India. The concept of ‘men as supportive partners’ received greater attention after ICPD 1994. In India, reproductive health programmes aptly recognized that men are important for their services. Indian Population Policy 2000 rightly recognizes the involvement in promoting responsible parenthood. An enabling environment has to be created for the responsible men and thereby to enhance the women’s reproductive health. In this regard, more studies are required to understand the issues of involving men in reproductive health issues further, especially on the existing myths and misconceptions among men, male-female dynamics in utilizing the reproductive health needs and low motivation amongst men in acceptance of vasectomy.

Objective of the Paper

An attempt has been made to understand the knowledge and attitudes of husbands on reproductive and child health issues, as the supporting partners and clients in the selected urban slums of Delhi.

Data and Sources

The required data were collected through a sample survey conducted by the Population Foundation of India, New Delhi, as the part of an intervention programme on RCH service delivery in the selected slums in Delhi

Programme Intervention

Population Foundation of India, New Delhi has initiated an intervention programme, namely, “Delivery of Quality RCH Services through Mobile Clinic and Linkages to Community Development Activities in Slum Areas of Delhi.” The programme aims to improve the reproductive and child health status of children, women and adolescents by providing clinical services through a comprehensive package.

In this intervention programme, baseline and endline surveys are proposed to conduct to understand the impact of the programme. In the baseline survey, 525 ever married women of age 15-49 years and 200 husbands were interviewed. Men were contacted to understand their knowledge of RCH issues, pattern of decision-making on their family size, acceptance of family planning methods and other RCH issues. In addition, data on husband-wife dynamics in accessing and utilizing the reproductive health needs and the knowledge and treatment of their own reproductive problems were asked and analyzed. The results are further discussed in the paper.

It can be concluded that if male's involvement is appropriately directed for the responsible partners and knowledgeable clients by removing their myths and misconceptions and enhancing their knowledge towards RCH issues, the comprehensive reproductive health programmes will have desired results. The responsible parenthood can be mainly achieved even in the backward areas by streamlining and shaping the male's multiple roles properly.

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