Engaging Men: Gender Norms and Family Planning in Tanzania

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Agenda

• Overview of CHAMPION Project and its approaches
• Selected reproductive health statistics for Tanzania
• Description of CHAMPION Baseline Study
• Key findings on men’s gender norms in relation to family planning (FP) services
• How to get men involved in reproductive health services
Background

• The CHAMPION Project’s goal is to promote dialogue on gender roles, increase gender equitable beliefs and behaviours, and, in doing so, reduce the vulnerability of men, women and families to HIV/AIDS and other RH outcomes.

• CHAMPION builds on EngenderHealth’s Men As Partners® approach.

• EngenderHealth leads the Project, and involves collaborating with FHI 360 (formerly AED) and local partners such as the Ministry of Health and Social Welfare (MoHSW) and Local NGOs.
The CHAMPION Project in Tanzania

Works to:
• Involve men in family health
• Promote gender equity

To address:
• HIV and AIDS
• Gender-based violence
• Unintended pregnancy
• Low contraceptive prevalence
• Maternal and infant mortality
CHAMPION’s Ecological Model

Operates at 5 Levels:

• Individual
• Community
• Health services
• Workplace
• Policy
The Tanzanian Context

• The total fertility rate (TFR) in 2010: 5.4 lifetime births per woman

• Contraceptive prevalence rate for all methods: 34% in 2010

• CPR for modern methods: 27%

Regions of Tanzania where CHAMPION Project is operating

Mwanza  Shinyanga  Tabora  Mbeya  Iringa  Morogoro  Lindi  Mtwara  Dar es Salaam  Pwani
CHAMPION’s Baseline Survey

• Objective
  – Explore links between gender norms and reproductive health attitudes and behavior

• Where
  – Urban areas of 8 regions of Tanzania—4 intervention and 4 nonintervention regions

• Methods
  – Large-scale household survey (2,873 participants)
  – 50 focus groups plus 41 key informant interviews
Key Findings: Gender-Equitable Men (GEM) Scale and Gender Attitudes among Men

• Overall, 53% of men in their individual interviews recorded a high level of support for gender-equitable norms.

• Results revealed a wide continuum from equitable to inequitable gender perceptions among individual men, e.g.
  • More than three-quarters disagreed that “Only when a wife has a child she becomes a real woman.”
  • A majority of men felt that “A man should have the final word on decisions in his home.”

• And in group settings, most men voiced support for traditional gender roles.
Figure 1: Support for gender-related attitudes

- Women who carry condoms on them are easy: 65.9%
- Men are always ready to have sex: 52.8%
- There are times a woman deserves to be beaten: 42.7%
- A man needs other women, even if things with his wife are fine: 46.1%
- A woman should obey her husband in all things: 61.0%

% of men expressing support for attitude

% of men perceiving their friends' support for attitude
Men’s Willingness to Participate in FP Services

• About 72% of men felt very comfortable with being counseled on FP with their partners.

• More than 75% of men felt it was very important that men participate in FP.

• These two variables were associated with men’s support for gender-equitable norms.
Figure 2: FP Counseling and Gender Attitudes

GEM score categories for men who felt it was very important to participate in FP

Support for gender-equitable norms

- Low: 11.4%
- Moderate: 30.3%
- High: 58.3%
| Do you feel that health facilities in this community welcome men to be counseled on FP together with their partners? | Support for Equitable gender norms |
|---|---|---|---|---|
| Yes | Low | Moderate | High | % |
|   | 31% | 38% | 42% | 39% (n=770) |
| No | 69% | 62% | 58% | 61% (n=1,202) |
Men Not Accessing RH Services

- Two-thirds of men and three-quarters of women felt that health facilities are not welcoming to men.
- No provider described their services as male-friendly.
- Only 30% of women reported that their partner had ever accompanied them to a health center during their pregnancy.
How Men Described Services

• “You are embarrassed because… going to the clinic is the responsibility of a woman and not a man, so people will see you as if you have been bewitched. They laugh at you.”

• “Even when entering the clinic, you find no space specially designed for men. It does not say openly that this is the clinic for parents, including fathers, but mother and child or pregnant women.”

• “Yes, a father is not seen… when you go to the clinic, you will be looked at as if you have entered a female toilet.”
Getting Men Involved: Individual & Community Level

• Promote positive, more equitable gender attitudes and behaviors

• Engage communities

• Challenge rigid social norms

• Promote positive health-seeking behavior among men and couples

• Use role models
Getting Men Involved: Institutional level

- Create male-friendly facility environments.
- Provide quality clinical and counseling services to men and couples.
- Equip health workers with skills to engage men.
Men Can Be Facilitators of Family Health
ASANTE SANA……

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