

## **Men and Family Planning in Bangladesh: A Multilevel Approach Using DHS Data**

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### ***Extended Abstract***

#### ***Context:***

Men and their role in sexual and reproductive health processes have received inadequate attention among researchers and policy makers. The efforts to focus on men were addressed almost a decade ago when the ICPD goals were formulated (UN, 1995). However, these goals were not properly conceptualised, both in research and practice, particularly in terms of appropriate and effective implementation at the individual and community levels. In Bangladesh, family planning (FP) program personnel are considering to involve men more directly in the reproductive health and family planning campaign. No successful strategic plan has been finalised yet other than budgetary concerns.

Bangladesh FP program is still women oriented. Historically, the value in soliciting involvement from and providing services to men has been largely overlooked (Population Council, 1998; Neasz and Banu, 1997). Tradition dictates that women are subject to the decisions of men in their lives. This is changing as opportunities for women open through education and employment. However, the multiple decision-making roles of men in reproductive health, particularly family planning, have profound influences on women's health (Piet-Pelon et al., 2000). Until recently, data about men's family planning knowledge, attitudes and practices were scarce (Ezeh et al., 1996; Gallen et al., 1986). The limited evidence to date suggests that the most successful family planning programs which targeted couples have rather skewed towards women (Ezeh, 1993). International studies from various regions have shown that reproductive health programs are likely to be more effective for women when

men are involved in some way (Helzner, 1996; Mbizvo and Bassett, 1996; Mistik et al, 2003).

***Objectives:***

This article investigates men's attitudes and behaviour towards FP in Bangladesh and further explores the associated determinants using the 1999-2000 DHS data. Attitudes are measured in terms of inter-spousal communication and subsequent approval of FP whereas behaviour is addressed in terms of current method choices and use. The results of this study are expected to provide programme and policy recommendations that encourage men's participation in reproductive health issues, both at the individual and community levels.

***Data:***

The study is based on the couple data set (N=2249) based on the 1999-2000 BDHS. The couple data set is generated by linking spouses from the male data set constituting a sample of 2556 currently married men aged 15-59 years and that from females which has a sample of 10,544 ever married women aged 10-49 years. The BDHS data is nationally representative and covers all the six administrative divisions, 64 districts and 490 *thanas* (sub districts). In the BDHS, the men data set did not provide information on men's approval of FP. Thus, women's response regarding their husband's attitude toward FP has been used from the women data set which is a part of the couple data set.

***Methods:***

Couple data set (N=2249) from the 1999-2000 Demographic and Health Survey (DHS) was used to fit logistic regressions for men's approval of FP, discussion of FP with partners and current use of contraceptives. Multilevel modelling was further considered to identify the possible community level impact on the outcome variables (attitudes and behaviour).

***Results:***

Almost 85% of men in the couple data set approve of FP and 49.6% discuss FP with their wives. Current use of contraceptives is observed among 65.1% of men. Male method use is only 9.5% (condom, male sterilization and withdrawal) which rose up

to 19.1% while considering periodic abstinence. Contextual effects were significant in the regression model which suggests that men's FP values and attitudes vary across communities. Inter-correlations between FP attitudes and behaviour were also established in the regression analysis. In addition, men's age, division, men's education, access to TV, wife's approval of FP, discussion of FP with partners, current use of FP and number of living children were found important determinants of men's approval of FP. For discussion of FP with partners men's age, wife's age, division, type of place of residence, couple education, access to newspaper, men's approval of FP, wife's approval of FP, current use of contraceptives, and number of living children are significant determinants. Finally, division, type of place of residence, men's education, access to TV, men's approval of FP, number of living children, wife's approval of FP, discussion of FP with partners and marital duration are significant determinants of men's current use of contraceptives. Significant community effect was found in the data set.

### ***Conclusions:***

The level of men's involvement in FP is inadequate in Bangladesh. Men should be more involved in the ongoing women-oriented FP program to ensure better reproductive health outcomes. The results highlight the need for appropriate community-level interventions to improve men's involvement in FP processes.

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