



Royal College of
Obstetricians &
Gynaecologists

Tunisian men implication in their partner's contraception

Boukhari M*, Bettaieb H**, Wadhen A*, Souayeh N**, Dab S*, ElGhraiiri A*, Oueslati H**, Mbarki C**

University Tunis Elmanar, Faculty of Medecine*

Department of gynecology and obstetrics, Ben Arous Hospital, Tunisia**



Introduction

The notion of sharing roles in matters of reproductive health is rarely discussed within the couple as long as it seems naturally to be the responsibility of women. Indeed, it seems essential to encouragement to be more interested in family planning and contraceptive use.

Aims :

- 1/Assess male partner's knowledge about contraceptive methods
- 2/Identify barriers preventing their involvement in the choice of these methods.

Methodology and research tools:

Type : Cross sectional study

Period : March 2021

Tool : Online questionnaire

Study population : sexually active adult men having a steady female partner using a contraceptive method.

Results : 75 responders

Mean age : 34 years (SD 10)

Knowledge about contraceptive methods : **96%**

Sources of information : media (**58.6%**) (Table 1)

Satisfaction about the received informations: **53%** (Figure 1)

→Reasons for non satisfaction : non sufficiency of informations (**91.6%**)

Contraceptive methods :♀pills (**98.6%**) /♂condoms (**94.4%**)(Table2)

Perceptions about contraceptive methods : efficiency (**64%**)/ side effects (**53.3%**) (Table 3)

Accompaniment of partners to doctor appointments regarding contraceptive method choice or checkups: **9%**

→Reasons for men non implication : public clinics not adequate (**53%**)/ women' decision to go alone (**12%**)

Results

Table 1 : Sources of information

Source of information	N=72	Percentage
Awareness compaign	5	6,6%
Educational institutions	29	38,6%
Family and friends	39	52%
Media	44	58,6%
Health institutions	26	34,6%

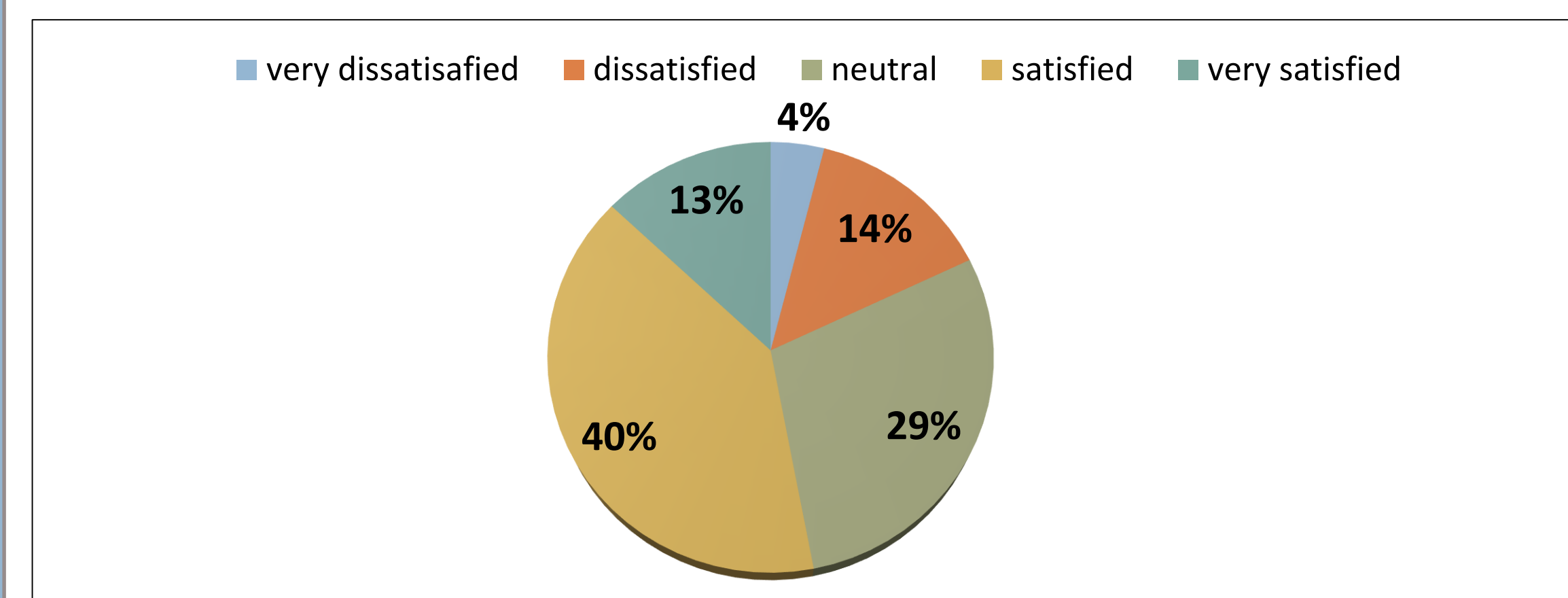


Figure 1 : Likert-Scale satisfaction about the received informations

Table 2 : Knowledge of contraceptive methods

Contraceptive methods	N=72	Percentage
Female		
Pills	71	98,6
Intrauterine device	53	73,6
Injections	24	33,3
Implant	16	22,2
Male		
Condoms	68	94,4
Pills	16	22,2
Vasectomie	13	18
Injections	5	6,9

Table 3 : Perceptions about contraceptive methods

Variables	N	Percentage
Efficiency of contraceptive methods		
Yes	48	64
No	3	4
I don't know	24	32
Side effets of contraceptive methods		
Yes	40	53,3
No	11	14,7
I don't know	24	32

Discussion

Our results were in line with those of the 2005 Health Barometer studies, INPES and a recent quantitative study carried out by Delphine Cadiergues on "Men's knowledge of contraception" concerning the most well-known contraceptive methods.

Side-effects were reported as a barrier to contraceptive methods use by 53,3 % of our participants.

The findings from this study showed that 58,6 % of respondents said that their knowledge about contraception came mainly from the media (N=44) while 52 % of them said they were informed by family and friends.

Overall, almost half of the participants were satisfied about the received informations about contraception (53%).Out of the dissatisfied ones, 90% perceived that the informations were not sufficient.

In a French study by Defrance and al in 2018, all respondents were satisfied and half of them asked for additional information on contraception.

In our study, Tunisian men feel less informed on this subject. We can see that the consideration of contraception as a forbidden topic to discuss or only reserved for women can lead to a brake in the access to information and in the use of contraception.

Thus, the key is to provide accurate, contextual and culturally acceptable information to men to engage them positively into family planning and contraceptive care. While men had good levels of information about contraceptive products, they lacked a clear understanding about how these products work and their related side effects. There is a need to reconsider the manner in which family planning and contraceptive information is delivered to men to improve their understanding and active participation in contraceptive uptake and use.

Discussion

The other key is to improve adherence to family planning and contraceptive care. Forgetfulness is a barrier to continued adherence to any long term chronic treatment. Social support is important to ensure that adherence remains adequate and is sustained, especially when negative side-effects can threaten continued use. As demonstrated by this data and other, men can and do play a key role in improving adherence by reminding their female partners to take contraceptive methods, and to attend their scheduled visits at the clinic .

Our results may be useful in exploring and developing strategies to improve male partner involvement in contraceptive methods use.

Conclusion

Media clearly have a major role in the spread of information regarding birth control methods. The results of our study allow us to consider other sources of information in order to improve male partner's knowledge about their partner's contraception. We suggest strengthening the informative role of both health and educational institutions, as well as multiplying accessible awareness campaigns. Public clinics should encourage the male presence during counseling sessions regarding birth control methods.