

Male participation in reproductive planning: an integrative review

Participação do homem no planejamento reprodutivo: revisão integrativa

La participación masculina en ma planificación reproductiva: una revision integrativa

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How to quote this article:

Nogueira IL, Carvalho SM, Tocantins FR, Freire MAM. Male participation in reproductive planning: an integrative review. Rev Fund Care Online. 2018 jan./mar.; 10(1):242-247. DOI: <http://dx.doi.org/10.9789/2175-5361.2018.v10i1.242-247>

ABSTRACT

Reproductive or family planning was a great achievement for the population. However, even though reproductive planning is a space for men and women, it is clear that the largest participating audience is composed by women. **Objective:** To describe the scientific knowledge of the participation of men in family planning. **Method:** This was an integrative review carried out in the LILACS, BDNF, and IBICS databases. Thirteen publications were found meeting the inclusion criteria. **Results:** The women's control over their own fertility is considered one of the foundations of the women empowerment process with the consequent fall back of the derivations of a possible unwanted pregnancy on females. **Conclusion:** Based on the thought that conception is the result of natural and sexual performance between men and women, it is imperative that we continue to work on this in all areas of educational activities, especially in reproductive planning, so that we can build gender equality in the process of choosing a contraceptive method.

Keywords: Family Planning, Man, Reproductive and Sexual Rights.

RESUMO

O planejamento reprodutivo ou familiar foi uma grande conquista para a população. Porém, ainda que o planejamento reprodutivo seja um espaço para homens e mulheres, é visível que o maior público de participação presente são as mulheres. **Objetivo:** Descrever o conhecimento científico sobre a participação do homem no planejamento familiar. **Método:** Revisão integrativa realizada na LILACS, BDNF e IBICS. Foram encontradas treze publicações que atenderam aos critérios de inclusão.

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Resultados: O comando da mulher sobre a própria fecundidade é considerado um dos grandes alicerces do processo de empoderamento, recaindo, conseqüentemente, sobre o ser feminino as decorrências de uma possível gravidez indesejável.

Conclusão: Partindo do pensamento que a concepção é resultado natural e sexual entre homem e mulher, é imprescindível que continuemos a trabalhar isso em todos os espaços de ações educativas, principalmente no planejamento reprodutivo, para que possamos construir a igualdade de gênero na escolha do método contraceptivo.

Descritores: Planejamento Familiar, Homem, Direitos Reprodutivos e Sexuais.

RESUMEN

La planificación reproductiva o de la familia fue un gran logro para la población. Sin embargo, a pesar de que la planificación reproductiva ser un espacio para hombres y mujeres, parece que la mayor audiencia de esta participación es de mujeres. **Objetivo:** Describir el conocimiento científico de la participación de los hombres en la planificación familiar. **Método:** Revisión integrativa llevado a cabo en las bases de datos LILACS, BDENF y IBECES. Se encontraron trece publicaciones que cumplieron con los criterios de inclusión. **Resultados:** El control de las mujeres sobre su propia fertilidad es considerada una de las bases del proceso de empoderamiento, por lo tanto las derivaciones de un posible embarazo no deseado volviendo a caer en la hembra. **Conclusión:** En base a la idea de que el diseño es el rendimiento natural y sexual de hombres y mujeres, es imprescindible que continuemos trabajando esto en todas las áreas de actividades educativas, especialmente en la planificación reproductiva, por lo que así podemos construir la igualdad de género en la elección del método anticonceptivo.

Palabras clave: Planificación de la Familia, El Hombre, Derechos Reprodutivos y Sexuales.

INTRODUCTION

Reproductive or family planning, as it is also known, was a great achievement for the population, especially for women, who had no assistance focused on their needs. There were numerous battles, many of them led by the feminist movement, until we reached the public policy of attention to women's health that we have today.

Family planning is a set of actions that allow the woman, the man or the couple to have more children. Since today the most used term is the reproductive one, since it is more appropriate to not have a limitation, since it does not necessarily need to have a fixed companion or companion to have children.¹

Even though reproductive planning is a space for men and women, it is clear that women are the main audience. This is due, consequently, to a historical construction of gender, social and cultural of which the decision of contraception still belongs to the woman.

The PNAISM had as main guiding questions related to gender, health promotion and integrality, seeking to strengthen the advances in the field of sexual and reproductive rights. Among one of the preconceptions, the inclusion of

men in the integral attention to women's health is based on the great stimulus of this in family planning.²

Despite the innumerable advances of society, women are still seen as the housewife and mother, and man is the great provider of the home. This construction of the mother being was for a long time the main role in a woman's life and it was always her responsibility to control the offspring. This reality has been changing, but we still have a great impact when we take it to professional practice.

Discussing the space where decisions are made to increase the family or not, which can influence the experience of a couple is of the utmost importance, since we will be discussing a social and cultural process of gender inequalities.

The great gap that still exists between man and woman is seen in the reality that finds the reproductive planning groups, in which man's participation is still small and the woman alone responsible for contraception.

Based on this reflection and the influence of gender relations on the activities of reproductive planning, it was considered primordial to investigate the evidence of human participation in this process. In this sense, the present study has to describe the scientific knowledge about the participation of man in family planning.

METHODS

It is an integrative review, which allows a synthesis of knowledge and the possibility of applying the results of studies in practice, as well as identifying gaps, which open the way for new studies.³

In order to prepare the present review, the following steps were used: selection of the study question, establishment of criteria for sample selection and search in the literature, definition of information to be extracted from selected studies, evaluation of studies included in the review, interpretation results and presentation of the review.⁴

Firstly, the question that led to the study was defined, which consisted of: what scientific knowledge is produced about man's participation in reproductive planning?

The following descriptors in health sciences (DeCS) were used as inclusion criteria for articles selection: articles containing summaries and titles in the health sciences (DeCS): Family planning and man, articles with abstracts and full texts available for analysis published in the period January 2005 to June 2015, in Portuguese, English and Spanish. Chapters of books were excluded.

Searches in the Latin American and Caribbean Literature on Health Sciences (LILACS) databases, Nursing Database (BDENF), Spanish Bibliographical Index of Health Sciences (IBECES), using the descriptors: family planning and man.

The data collection was carried out in November and December 2015, obtaining 153 studies in the database BDENF, 73 in the IBECES and 759 in the LILACS, totaling 985 publications. Next, the selection of the eligible studies

was made according to the previously established criteria and 71 studies were elected and an integral reading was performed. After this analysis, 57 were excluded, forty-two because they were not related to the subject and fifteen because they did not have complete texts available, remaining 15. Of this total, 4 publications were repeated in the databases and were considered only once, and 13 studies were selected, with 5 being in the BDENF database and 8 in LILACS.

To obtain the data, a data collection form was created, created by the authors, containing information about the authors and year of publication of the study; Database and periodicals; Place of accomplishment and language of the publication, objectives, results and conclusions of the studies.

The final synthesis was developed in a descriptive way with regard to the objectives, results and conclusions obtained from each of the studies. The data were aligned by similarity and organized into thematic categories. At the end, the last stage

was carried out, which is the elaboration of the document with the complete description of the steps.

A table below shows the selection of studies using the database.

Table 1 - Distribution of articles found and selected by databases

Data base	Articles			
	Found	Pre-selected	Excluded	Analizeded
BDENF	153	16	11	5
IBECS	73	2	2	0
LILACS	759	54	47	6

RESULTS AND DISCUSSION

Table 2 represents the summaries of the studies included in the review, which gives rise to the essence for the elaboration of the results, discussion and respective conclusion on the theme of human participation in reproductive planning.

Table 2 - Synthesis of included studies on the scientific knowledge of man in family planning

Year/Base	Authors	Objective	Results/Conclusions
BDENF 2007	Pereira QLCP, Silva CBDCA, Pelzer MT, Lunardi VL, Siqueira HCH.	To report the lived experience in which the (re) construction of a Family Planning group was processed in a Basic Health Unit.	The strategies used in the (re) construction of the group allowed for a dialogical interaction between the users, the community agents and the health team, besides overcoming the normative and authoritarian model, replacing it with the participatory democratic one.
LILACS 2011	Santos JC, Freitas PM.	Critically analyze the current limitations of family planning applied to public health and propose changes considering the model of the social sciences applied to health and the perspective of family development.	Through the proposed family planning model, it is hoped to contribute to the health promotion of low income families and to bring about social and economic changes. Family planning, from the perspective of development, adds system organizing variables, allowing planning based on sustainability and the family life cycle.
LILACS 2011	Silva RM, Araújo KNC, Bastos LAC, Moura ERF.	Understand the meaning of family planning given by women of reproductive age, identify their perceptions about the care received, and the partner's participation in decisions about contraceptive use.	It was found that the meaning of family planning for these women is related to avoiding children and values relevant to their cultural, economic and social realities. Assistance is received in isolation, not prioritizing the needs of women, without educational and emancipatory.
BDENF 2011	Bezerra MS, Rodrigues P.	To apprehend the social representations of men about Family Planning (PF), based on Theory of Social Representations.	Man still does not perceive himself as an active participant in the service for discussions that go beyond the topic of children, valuing notions of citizenship and care with their own health.
LILACS 2011	Sauthier M, Gomes MLB.	To characterize the activities developed by health professionals, especially nurses, in the implementation of the Family Planning Program; To analyze the conduct of health professionals regarding the integration of men in these activities and to discuss the ethical dimension of this behavior for the integration of men into the program.	It has been observed that the policy of bringing man to the heart of the discussions in Family Planning groups exists in the Program proposal, but in practice it is flawed. Nurses and social workers in educational action live with limits and possibilities and the more they experience this dialectic tension, the more they will be prepared to overcome those difficult situations.
LILACS 2013	Silva GS, Landerdahl MC, Langendorf TF, Padoin SMM, Vieira LB, Anversa ETR.	To describe how women perceive their partner's participation in family planning.	Family planning assistance needs to include men, providing subsidies for their active participation and recognition of the couple and the family as a care unit.

Year/Base	Authors	Objective	Results/Conclusions
LILACS 2014	Morais ACB, Cruz RSBLC, Pinto SL, Amorim LTCG, Sampaio KJAJ.	To know the female perception about the participation of men in family planning.	Women perceive the participation of the man as insufficient and believe that a more effective contribution would include the companion's going to the consultations. By choosing alone and taking responsibility for contraception, the woman exempts the partner from an assignment that is both reinforcing the socially constructed idea, and accepting, consciously or unconsciously, that they are in charge of reproductive affairs.
LILACS 2014	Casarin ST, Siqueira HCH.	To know the view of nurses about the search for family planning actions and services by men in the municipalities of a health region of Rio Grande do Sul.	The imaginary of the man as invulnerable or of the family planning with the responsibility of the women can be associated to the distance of them from the services, however the barriers of access and the unavailability of some actions linked to the health system can be the major obstacles.
BDENF 2014	Morais ACB, Ferreira AG, Almeida KL, Quirino GS.	Identify the forms of male participation in the family planning process, as well as the factors involved in this participation, to know the masculine knowledge about the method used by the couple and to describe how the negotiation process happens in the choice of method.	Family planning still occurs unilaterally and is based on the gender hierarchy, which imposes on women the burden of symbolic and corporal responsibility for contraception.
BDENF 2014	Cícero ACVFPP, Mandadori F, Marcon SS, Barreto MS.	Describe the role of the family in the choice of vasectomy, the period of professional counseling and the results of the procedure from the perspective of adult men.	Nurses need to participate more actively in counseling men who seek health services for vasectomy, and the family should be included in the process because it supports the male decision.
BDENF 2013	Silva NMP, Lemos A.	To know the opinion of young university men about abortion and their participation in reproductive planning.	These young people are more participatory in the reproductive process and more aware that they are an important part of the abortion decision-making process.

The database that had the largest number of publications was LILACS (759), followed by BDENF (153) and IBECs (73). And it was LILACS that obtained the largest number of studies included.

The Portuguese language was predominant (100%), corresponding to 11 publications. This result conveys the incipience of research developed in Brazil and published in foreign journals, as well as the majority of studies, whether from the LILACS database, which includes studies from Latin America.

In the construction of the study, the first descriptor option for the research was reproductive planning, however no publication was found. The term reproductive planning is best applied in relation to family planning and should not be associated with birth control. Still, all selected studies still use the old term for research.¹

Another curious fact is that despite the focus being on man's participation, of the 11 selected studies, only 4 had man as subjects. In the others, the subjects were women, health professionals or even a reproductive planning group. One of the studies with a focus on men speaks of vasectomy choice.

Taking into account the participation of health professionals in the health education process, there were publications that characterized the activities developed by nurses in the implementation of the Family Planning Program

⁵, as well as the nurses' view on the search for services by the man.⁶

Men still remain in the services of women and end up not actively participating in the choice of contraceptive method. Often the barrier method (condoms) is offered and then the vasectomy.⁶

As a starting point, male participation in family planning is reduced and there is a gap in programs for male sexual and reproductive health in various regions of Brazil. Most of the time, the woman participates alone in the orientation meetings, choosing the contraceptive and assuming the responsibility of the decision of the quantity of the children.⁷

Man has the perception that he must be part of reproductive planning and feels important in this process. This transformation is paramount since it can promote greater equality in gender relations and a new view of fatherhood.⁸

Vasectomy is referred to as a safe, simple, fast and permanent contraceptive method.⁹ One study pointed out that men manifested innumerable fears about vasectomy, particularly regarding their devaluation as a man. However, everyone said they were happy to have a vasectomy and cited several positive aspects, such as improving their sexual relationship with partners, especially overcoming the fear of unwanted pregnancies, as well as moving away

from concerns and consequences with the use of methods contraceptives.¹⁰

Despite the great advantages of vasectomy, its practice is still not common. Although the number of surgeries has increased in Brazil since its introduction in the table of procedures promoted by the Unified Health System, the absolute number of procedures is not so satisfactory to understand that man has a decisive role in reproductive planning.

The importance of vasectomy is clear through studies, but there are some caveats. Male participation in family planning goes beyond a simple definition of vasectomy because it requires an approach to gender relations, considering that men also have opinions, culture, feelings, emotions and religion.¹¹

The enormous inequality in the responsibility of men and women to control fertility is evidenced by the number of contraceptive methods dedicated to women and men, the responsibility of the reproductive process for women, and the difficulty of male adherence to contraceptive methods, as was previously discussed vasectomy.¹²

The other selected studies clearly discuss the physical and active participation of men in the space of reproductive planning. Gender relations emerge as one of the great factors for the reality of educational groups.

Women's control over their own fecundity is considered as one of the great foundations of the process of empowerment, consequently falling on the female being the consequences of a possible undesirable pregnancy, being inevitable that it undertakes the commitment of contraception.¹³ Thus, the socially and culturally constructed view of the responsibility of contraception imposed and accepted by women and the absence of man in this process is evident.

The sexual roles of men and women are different in our society and contraceptive practice has come to be characterized as a feminine responsibility. Even with a change, in which women are increasingly working out, studying, leading families, changing their values, they still face difficulties between the current experience and the education they have received. For this reason, the practice of contraception is sometimes guilty, anguished and ambiguous.¹⁴

Therefore, it is essential that health services focus on gender differences, in order to involve men in reproductive and sexual health, so that experiences, choices and the use of methods of contraception and responsibilities with women.¹⁵ In the perspective of reproductive and sexual health, it is imperative to involve men and women, where nursing and other health professionals identify their needs.¹⁶

We can say that reproductive planning must take into account the couple's freedom to decide the number of children they can or want to have. That this be based on gender awareness, taking into account the inclusion of men in activities and the Program of Reproductive Planning and understand the position of women in society, as well as the

principles of educational actions, where men and women exercise the same rights.

CONCLUSION

Based on the findings of the study, it is evident the need to invest in this issue, since there are few publications that discuss the right and indirect participation of men in reproductive planning.

As might be expected, gender relations appear as one of the major factors in the small number of men participating in the Program. When they participate, they still have the awareness that the responsibility belongs to the woman.

Their participation still happens in a punctual and limited way. There is a need for a reproductive planning strategy that increases men's participation in these sexual and reproductive health policy spaces, even alternative times for the couple to participate.

Starting from the idea that conception is a natural and sexual result between a man and a woman, it is imperative that we continue to work this in all spaces of educational actions, especially in reproductive planning, so that we can construct gender equality in the choice of contraceptive method.

The female audience perceives and feels the partner's participation in this process, which they still carry alone. Even in the current juncture, in which women are increasingly breaking the boundaries of their homes and going into the labor market, becoming heads of their family, the process of contraception is still not relatively proportional.

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Received on: 09/12/2016
Reviews required: 09/14/2017
Approved on: 01/04/2017
Published on: 01/08/2018

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