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Qualitative Research on Gender Norms and Family Planning (FP) Decision-Making in Tanzania

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Background and Rationale

- Gender norms often support high fertility
- Family Planning (FP) programs and services accommodate rather than challenge gender norms
- Gender norms could positively influence Reproductive Health (RH)

Objectives

- Characterize the role of gender norms in reproductive health decision-making and contraceptive use in Tanzania
- Make recommendations for behavior change interventions that address gender-related barriers to effective FP choices in Tanzania.

Methodology

Sites

- Temeke District, Dar es Salaam Region (Urban)
- Mbeya and Mwanza Regions of Tanzania (Rural)

Sample

- 30 recently married men and women
- 12 key decision-makers

Data Collection Plan	Site one	Site two	Site three	Total
I. In-depth interviews (72 total)				
Young married women				
Recent adopters	6	6	6	18
Never users	4	4	4	12
Young married men				
Recent adopters	6	6	6	18
Never users	4	4	4	12
Key decision-makers	4	4	4	12
II. Focus group interviews (6 total)				
Women	1	1	1	3
Men	1	1	1	3

Findings

Definitions of masculinity and femininity

Masculinity:

Head of the household

Provider for the family

Able to have sex and satisfy a woman

Able to have children

Able to participate in society

Femininity:

Supporter of the husband

Caregiver of the family

Able to have children

- Respondents spoke about the economic roles women were increasingly taking on

Findings

Gender Norms

Sex

- Men need sex more than women
- Men decide when to have sex
- A woman should not refuse to have sex with her husband

Childbearing and family size

- Only when a man/woman has a child is he/she 'complete'
- A real man has many children
- Large families give men social prestige

Communication and decision-making

- The man makes the final decision in the household
- It is disrespectful for a woman to disagree with her husband
- A woman should obey her husband
- The man decides family size and spacing

Findings

Gender norms

Contraceptive use

- The man decides whether or not to use family planning
- A woman should not use family planning without her husband's consent, and should not use FP in secret
- Women who want to use contraceptives want to have affairs
- Men who use condoms are having affairs

Violence against Women

- It is alright for a man to beat his wife if she refuses to have sex with him
- It is alright for a man to beat his wife if she disagrees with or speaks rudely to him
- It is alright for a man to beat his wife if she uses contraceptives secretly

Findings

Demand for family planning

- High level of unmet need: Desire to space/limit birth expressed by 21 of 23 non-users
- Reproductive intent formed by perceptions of how many children could financially support
- Recognition of many benefits to spacing and limiting children

Findings

Perceptions about contraceptives

- Perceived side effects: caused cancer, weight gain or loss, continuous bleeding or total stoppage of periods, barrenness, and could get lost in the body (implant)
- Fear of side effects main reason for not adopting contraceptives
- Strong stigma attached to condoms and rarely used among married couples

Findings

Couple communication and decision-making

- Common for husbands and wives to discuss family planning methods
- Little evidence of couple negotiation around family planning decision-making
- Men were final decision-makers on contraceptive use (for/against)
- Secret contraceptive use warranted warning, wife beating, or divorce
- Only two women admitted to using contraceptives in secret

Findings

Couple communication and decision-making

“[Telling my wife to use contraceptives] was a command, not a request. I told her that it was a must for us to use it.” — male user

“She did not question me nor ask the reason why [I wanted 4 children]. She told me that I’m the one who makes the decisions and that she cannot decide anything for me.” — male non-user

Discussion

- Gender functions as barrier to contraceptive use in combination with other factors
- Men's dominance in decision-making only a barrier to contraceptive use insofar as men want large families
- Fears about side effects more powerful deterrent to contraceptive use than inegalitarian gender norms

Recommendations

- Interventions to address BOTH inequalitarian gender norms AND fears and misconceptions of contraceptives
- Encourage men to seek information on modern contraceptive methods from reliable sources and to similarly encourage wives or partners
- Strengthen capacity of clinics and other sources of contraception to provide accurate information