

Evidence and Action

Special Issue

GOOD PRACTICES

Ghana Country Office 5th Country Program (CP5) 2006-2011

'Male Involvement in Sexual and Reproductive Health'





DESCRIPTION & CONTEXT

At the onset of 5th Country Program (CP5), the Ghana Country Office took a decisive role to promote male involvement as men and boys are critical to decision-making within Ghanaian culture. Baseline data in support of male involvement projects informed the Country Office to focus on reproductive health rights and family planning within the larger scope of reproductive health services. Baseline research also indicated that Ghanaian young men who believe strongly in male stereotypes exhibit high-risk behaviors and are socially encouraged to establish dominance over women. Within the context of the country, boys and men are often socialized to accept violence as appropriate male behavior that is a means to display their manhood and to protect their "honor". These findings also demonstrated that most women had very little knowledge about their legal rights and could not seek legal or health services outside of the control of their male counterparts. The study confirmed that there remains unequal access to information on sex and decision-making power on sexual and reproductive health issues. This results in limited bargaining power of women vis-à-vis their husbands or

sexual partners in obtaining appropriate medical or legal care.

As a result of these findings, the Ghana Country Office carried out direct interventions in the domains of rights (reducing harmful practices and gender-based issues) and family planning (male involvement in antenatal care, child birth, and post natal care). Overall, male involvement activities benefitted a total of 17 districts in Ghana. Key partners in the implementation of male involvement activities include the International Federation of Women Lawyers (FIDA), Coalition of Muslim Organizations in Ghana (COMOG), and Ghana Health Service (GHS). These partners, in turn, have secured strong local networks with the Department of Social Welfare, Department of Women, National Youth Program, National Disaster Management Program, Ghana Education Service, Ghana Health Service, District Assembly Members, Traditional Leaders, Community-Based Organizations (CBOs), Ghana Police Service, Ghana Fire Service, the Judiciary, Domestic Violence and Victims Support Unit (DOVVSU) and Commission of Human Right and Administrative Justice (CHRAJ).

THEMATIC AREA

Reproductive Health, including Sexual and Reproductive Health Rights and Gender.

PRIMARY KEYWORDS

Domestic violence, gender-based violence, sexual and reproductive health rights, HIV and AIDS prevention, family planning, male involvement, decision-making, household, traditional authorities, health services, paralegal, knowledge, culture.

OVERALL OBJECTIVE

To increase male involvement in order to influence positive decision-making on health seeking behaviors and utilization of reproductive health services.

Additional supporting objectives include:

1. Create awareness and commitment through the form of a platform and network for male involvement.
2. Increase male involvement in the promotion of family planning, gender equality, women's human and reproductive health rights, domestic and gender-based violence, and maternal and child health.
3. Ensure an enabling environment for dialogue and discussion for constructive male involvement in the promotion of reproductive health services.
4. Increase participant knowledge about concrete and effective strategies to involve men in rights and reproductive health issues.

STRATEGY, KEY CHALLENGES, AND IMPLEMENTATION

Strategy

The overall strategy of the program was to increase male involvement in order to influence decision-making towards healthier outcomes in reproductive health, particularly sexual and reproductive health rights as well as family planning.

Key Challenges

There were several key challenges to the program:

- There remain ongoing cultural barriers and lack of

education on how women can successfully participate in decision-making and negotiate safer sex.

- Key informants noted that male involvement activities happened in pockets, but not in a systematic fashion across target areas.
- The strategy to increase male involvement specifically in two areas – (1) health rights and (2) family planning – across 17 districts appears disjointed and not altogether comprehensive.
- Given the cross-cutting nature of male involvement, UNFPA CP5 staff find it challenging to isolate indicators directly attributable to program success.
- When project funds and monitoring staff are not available to support meetings and project activities, male groups lose morale and lack proper guidance to continue collecting data .
- In terms of logistical barriers, some men reported having no means of transport to take their wives to health appointments. They also face seasonal challenges where agriculture and food security activities take precedence



over accompanying wives or allowing wives to attend health appointments.

Implementation

Implementing partners such as FIDA, COMOG, and GHS have carried out advocacy activities, durbars, media interactions, conferences, behavior change exercises, trainings and male group formation across 17 districts.

Specific activities around sexual and reproductive health rights include:

- Lobbying and sensitization activities with religious and traditional leaders.
- Advocacy activities with religious leaders, community members, and the media.
- Sensitization and education of men through conferences and training sessions.
- Establishment of knowledgeable and skillful community paralegals.

- Trained community paralegals to support the family court system and traditional authority system.

Specific activities around family planning include:

- Sensitized religious and youth leaders on sexual and reproductive health.
- Conducted a campaign of health talks at child wellness clinics, durbars, antenatal clinics, churches, and mosques.
- Trained GHS staff to incorporate and encourage men in family planning and reproductive health activities.

PROGRESS AND RESULTS

In support of sexual and reproductive health rights, the following results were achieved:

- Trained **172** community paralegals to manage **1,725 cases** of sexual and reproductive health issues such as early marriage, teenage mothers, illegal abortions, child maintenance, upkeep of women, marital issues, problems of inheritance, and family planning.



- Reached over **8,414** beneficiaries on sexual and reproductive health and human rights.
- Conducted **37** community sensitization and advocacy sessions.
- Conducted all-male sessions for **360** community men and 230 traditional leaders.
- Organized **20** radio programs.
- Organized two national male conferences for **195** men.
- Produced and printed over **10,000** posters and fliers for community outreach.

In support of family planning, the following results were achieved:

- Strong anecdotal evidence across regions and stakeholders that men have started accompanying their

wives and participating in family planning as a result of campaign efforts.

- Increased male attendance at antenatal clinics, where from 2006 to 2011, male attendance across the 17 districts increased **28.2%**.
- Increased involvement and formation of male groups.
- Increased knowledge in birth spacing, breast feeding, and childbirth.

LESSONS LEARNED

- Adult men continue to feel shy and embarrassed to discuss sex reproductive health and family planning. Therefore, the establishment of male groups helps to create safe environments where they can learn about birth spacing, breast feeding, and childbirth.
- Conducting a comprehensive study on male involvement will help to inform the 6th Country Program on where to focus activities and efforts.
- Before engaging in activities, UNFPA staff can determine direct and attributable indicators of program success to better gauge whether program efforts were successful.
- Male groups continue to need monetary and non-monetary support from donors; otherwise, they lose focus and motivation.

CONCLUSIONS AND RECOMMENDATIONS

Male involvement activities may need to be more comprehensive than just human rights and family planning as well as more expansive than just 17 districts. The Male Involvement in Sexual Reproductive Health campaign is an innovative approach to influence behavior and health outcomes for women. It leverages the contextual realities of male-dominated communities to work within the culture. Although there has been some progress, subsequent programs can more succinctly capture results and improvements with clear and attributable data.

Recommendations for the program are as follows:

- Pre-determine male involvement topic areas and domains.



- Determine better indicators.
- Publicly recognize and support ongoing male groups.
- Systematically scale-up efforts by continuing to formulate, educate and sensitize male groups across more regions and districts.

PARTNERS

FIDA, COMOG, and GHS.

SOURCES AND LINKS

- Independent Rapid Assessment of 'Male Involvement' in the Northern Region of Ghana, November 2012.
- Focus group discussion (9 person group) with Sogakope Community Paralegals and Men's Group, November 2012.
- **Key informant Interviews with**

Mary Basu, Community Health Nurse Midwife of GHS.

Annaleah Ayamga, Community Health Nurse of GHS,



Mammah Tenii of UNFPA; Mercy Konadu of UNFPA

Faisal Bawa of UNFPA.

- FIDA – Ghana, National Male Conference; Theme: Men as Partners, Promoting Reproductive, Maternal Health and Gender Equality in Ghana, December 2011.
- Concept Note on National Male Conference, organized by FIDA-Ghana and supported by UNFPA, 2011
- COMOG.

ACKNOWLEDGMENT AND FURTHER INFORMATION

This good practice was produced with technical input from the following expert:

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