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# Engaging the Missing Link

## Evidence from FALAH for Involving Men in Family Planning in Pakistan



## MEETING REPORT

National Consultation

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**USAID**

 Evidence

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The Evidence Project uses implementation science—the strategic generation, translation, and use of evidence—to strengthen and scale up family planning and reproductive health programs to reduce unintended pregnancies worldwide. The Evidence Project is led by the Population Council in partnership with INDEPTH Network, International Planned Parenthood Federation, Management Sciences for Health, PATH, Population Reference Bureau, and a University Research Network.

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## Background

Male engagement in family planning is widely recognized as an important programmatic component. It is especially relevant in countries like Pakistan where fertility rates remain high and family planning use is low due to a host of factors that include gender inequality and men's dominant role in family decisionmaking.

The Population Council Pakistan, as part of the Evidence Project, synthesized the existing evidence from both national and international sources and developed a set of research documents highlighting the importance of involving men in family planning efforts in Pakistan. On June 16, 2015, Population Council Pakistan convened a National Consultative Meeting in Islamabad to share the findings of these important publications and provide evidence-based recommendations to major stakeholders who are directly involved in shaping population and health policies and programs. The aim was to stimulate thinking and build consensus on a renewed male engagement strategy as part of the Plan of Action to be adopted at the National Population Summit to be held in November 2015.



The meeting was attended by more than 60 provincial and federal government representatives, including member provincial assemblies (MPAs) from Khyber Pakhtunkhwa (KP) and Punjab; provincial secretaries of population welfare departments from KP, Gilgit-Baltistan (GB) and Azad Jammu & Kashmir (AJK); and representatives of provincial health departments, donor organizations, health professionals, NGOs, and partner organizations.

The consultative meeting provided an opportunity for participants to share their views on involving men in family planning in Pakistan, as it has become imperative for the family planning program to seek the best possible ways male involvement can improve the wellbeing of men's families and the people of Pakistan. The representatives from Punjab, Sindh, KP, Baluchistan, GB, AJK, and partner organizations also presented broader lessons for improving family planning programs as well as recommendations for including men in family planning.



# Proceedings

## OPENING SESSION

On behalf of USAID, Ms. Monica Villanueva, MCH Team Leader, USAID Health Office, Islamabad, welcomed the participants. She said that despite the fact that people of Pakistan want to better plan their families, the fertility decline in the country as compared to other Asian countries is quite slow due to less focus on men as partners in family planning. She said if we want to expedite the progress, it becomes important to take men on board which may also help in reducing issues of access to family planning services.

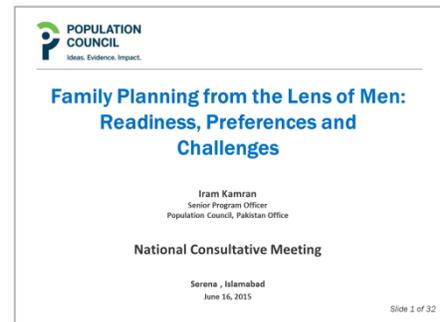


Dr. Zeba A. Sathar (T.I.), Country Director, Population Council, in her welcome remarks, set the stage for the consultative meeting by introducing the participants to the Evidence Project's scope of work, and why the Evidence Project and the Population Council are holding this consultation on male involvement in family planning in Pakistan. She said that over the past six decades, the country's population program's focus has been on women. Men have never been recognized as important agents of fertility change despite their important role in decisionmaking. As a result, they were neither involved as informants in program design nor as recipients of any family planning interventions. Family planning decisions were considered “a woman's domain” and to a large extent this was reinforced by interviews with men. Therefore most, if not all, programs and interventions were targeted to women as providers and as clients. Efforts to involve men have been at best sporadic and halfhearted and certainly not carried out at the scale required. Dr. Sathar emphasized that it's time to introduce a real change in the family planning programmatic strategy and focus on promoting services for men because it may be one of the critical ways of accelerating a fertility decline in the country and meeting Pakistan's pledge made at the 2012 London Summit to increase the contraceptive prevalence rate to 55 percent by 2020. She also briefed stakeholders that Pakistan is planning to make a new pledge and announce its plans and commitments at the National Population Summit to be held in November, 2015. She said that there is a serious need to mobilize new players and new channels, and one of them is certainly going to be “putting men alongside women” to reduce unmet need.



## SHARING OF FINDINGS

Ms. Iram Kamran, Senior Program Officer, Population Council, made the first presentation. It was based on a policy brief entitled, “Meeting Men’s Unmet Need for Family Planning in Pakistan,” which synthesizes the data from several of Population Council’s recent studies and other research carried out in Pakistan on men’s perspectives of family planning. Ms. Kamran, talked about Pakistani men’s readiness to be more involved in family planning, the challenges they face in family planning adoption and continuation, and the preparedness of the health sector to respond to their needs. She said that economic pressure and inflation are the main reasons why men want to use family planning methods. The Council research also shows men are now concerned about their wives’ health. She further added that men want good services and information to be made available to them.



The second presentation was by Ms. Seemin Ashfaq, Deputy Director (Programs), Population Council. The presentation was based on a case study, “Engaging the Missing Link: Evidence from FALAH for Involving Men in Family Planning in Pakistan.” The case study focused on the USAID-funded Family Advancement for Life and Health (FALAH) project, implemented by the Population Council in 20 districts from 2008 to 2012. The findings established that inclusion of men in family planning efforts is a feasible and effective strategy to help shift attitudes and behaviors in Pakistan and perhaps in other countries in the region and globally as well.



The presentation highlighted that there is clear evidence that religious and social barriers to adopting family planning are more pronounced among men than women. The FALAH project aimed to improve access to family planning services by working with Ulemas and local religious leaders at the grassroots level to mitigate the perception that religion is opposed to family planning. She gave details of the interventions that were implemented for reaching men which included holding male group meetings, providing interpersonal counseling to men through male volunteer workers, performing interactive theater that targeted both men and women, sensitizing local religious leaders, and conducting mass media campaigns.

The success of FALAH’s male interventions across a range of districts indicates that they can be applied in a variety of settings to involve men in family planning, encourage use of male methods of contraception, and encourage men to support their wives in using birth-spacing services in the interests of maternal and child health.

## RECOMMENDATIONS BY KEY STAKEHOLDERS TO INVOLVE MEN IN FAMILY PLANNING

In a special session, representatives of the provincial Population Welfare Departments as well as the partner organizations shared their perspectives on the topic of male involvement. The main points are as follows:

### **Mr. Fazl-e-Nabi Khan, Secretary, Population Welfare Department, KP**



Mr Fazl-e-Nabi Khan emphasized the need to develop strategies to involve men in family planning programs which are in congruence with society's moral, cultural, and social values. He noted that engaging male mobilizers could be one of the strategies to motivate men and address their misconceptions regarding family planning and contraception. He said both public and private organizations need to focus on male related interventions to engage men in family planning. He also highlighted the importance of behavior change communication campaigns to increase the knowledge base of men regarding family planning issues. Finally, he emphasized the need to involve religious leaders in the program in more conservative communities.

### **Mr Ijaz Ahmad Khan, Secretary Population Welfare Department, AJK**



Mr Ijaz Khan highlighted the need to involve and give more focus to religious leaders in obtaining their support for effectively reaching out to men and addressing their religious misconceptions about family planning. Religious leaders should be motivated and encouraged to serve their respective communities as proactive advocates.

### **Dr. Riaz Memon, CEO, Peoples Primary Health Care Initiative (PPHI), Sindh**



Dr. Riaz Memon stressed improving management issues in the provision and delivery of services. He emphasized the need to train male providers in delivering services to male members of society. He pointed out that we have done enough in generating demand. Now there is a need to give proper training to male providers to meet demand. Moreover, there is a need to improve supplies of male methods to effectively serve the male segment of society.

### **Dr. Ijaz Sheikh, Additional Director General-Health Services, Integrated Reproductive Health & Maternal, Newborn and Child Health Program (IRMNCH), Punjab**



Dr. Ijaz Sheikh focused on the need to bring together both the Health and Population Welfare Departments to jointly address issues related to male involvement and family planning services. He said that a joint strategy by both departments can really help to achieve family planning goals. He also reported that the Punjab government has implemented a contraceptives logistic management information system (CLMIS) in four districts of Punjab and soon it will be

implemented in the entire province, which will greatly improve contraceptive accessibility.

**Mr Ashfaq Ali Shah, Additional Secretary, Population Welfare Department, Sindh**



Mr. Ashfaq Shah started his talk by asking a question: “How many men come with their wives to the health centers?” The answer was very few. He emphasized that there is a need to provide services through the network of public health facilities in the evening hours so men can accompany their wives. He also highlighted that in Sindh both the health and family welfare departments are providing family planning services jointly. There is need to redefine the role of social mobilizers and also to focus on couple counseling which has been ignored in the past.

**Dr. Afshan Tahir, Director Research, Population Welfare Department, Punjab**



Dr. Afshan Tahir noted that men are still hesitant to purchase contraceptives and that needs to be rectified through individual counselling and a media campaign. There is also a need to improve men’s access to contraceptives by expanding the network of service provision from public and private facilities. She highlighted the real problems are access, training of male service providers, and quality of services. The Population Welfare Department Punjab has trained 360 religious scholars at the district level on basic information on contraceptive methods and benefits of family planning to enable them to address the topic during their sermons.

**Mr. Muzaffar M. Qureshi, Resident Director, Green Star, Pakistan**



Mr Muzaffar Qureshi said that FALAH was a learning experience. He highlighted the importance of social mapping to identify community leaders to influence their community members. Interpersonal communication can really add value to address misconceptions among men. He advocated using the network of 50,000 fast moving consumer goods (FMCGs) retail stores and 25,000 pharmacies in addition to the 4,000 population centers and 19,000 health service outlets to expand access to family planning services. Staff at FMCGs and pharmacies also need to be sensitized so that they become advocates for the cause. Mutual decisionmaking by the husband and wife should be encouraged. Male involvement is a challenge; however, if men are more aware, they can add value to the program’s efforts.

**Dr. Sheikh Tanvir Ahmad, CEO, HANDS**



Dr. Tanvir Ahmad stressed keeping our focus on repositioning messages of family planning as birth spacing, which have proven successful in the FALAH project and quite effective for the population program. While Lady Health Workers (LHWs) and male mobilizers of the Population Welfare Program are very important for the provision of services at the door step, male health workers should also be employed by the health department to reach out to communities at their door step.

## OPEN DISCUSSION

In an open discussion session moderated by Dr Ali M. Mir, Director Programs, Population Council, Pakistan, participants were provided an opportunity to speak and share their thoughts. The discussion was focused around three questions:

1. How and what to communicate to men?
2. How to improve access to services for men?
3. What should be the range of services that can be provided to men?

The questions generated a lively discussion and brought many ideas and recommendations from the floor. The key points are as follows:

### Reaching out to Men with Information

- Men need to be reached through a well thought out communications campaign that includes multiple interlinked strategies, such as interpersonal communication and mass media, providing information on the range of contraceptive choices that are available, where services can be obtained, arguments to counter misconceptions, and religious view points on family health and wellbeing. The various mechanisms for reaching out to men can be:
  1. Use of a hotline / tele-health services and m- health messaging.
  2. Health talks at places of work such as industrial areas.
- In certain Muslim countries such as Bangladesh, tea stalls have been used as forums for conveying information and overcoming social taboos; this innovative approach may be applicable to Pakistan. Other options to reach men include utilizing the pulpit of the mosques as well as talks by elected representatives.
- Training male care providers, especially private sector providers, to proactively engage in discussions about family planning with men visiting them for any health issue is needed.



### Access

- To improve access to services, it was recommended that community based distribution systems be introduced that include male community depot holders who are male health workers who partner with and share tasks with LHWs. It was also recommended that social marketing activities be expanded to reach small shopkeepers in rural communities in maintaining a stock of appropriately packaged and marketed condoms.

### Range of Services

- To deliver a wide range of male oriented reproductive health services, including family planning, management of infertility, and treatment of sexually transmitted infections and sexual disorders, both public and private sector male providers, including allopathic doctors, paramedics, hakims, and homeopaths must be trained.

## CLOSING SESSION

### Parliamentarians Support Involving Men in Pakistan's Family Planning Program

At the closing session of the consultative meeting, Mr Mahmood Jan, chairman of the standing committee on health, KP Provincial Assembly, appreciated the new direction the family planning program was taking. He noted that in a province like KP, where the man is the deciding authority on all family issues, it becomes necessary to bring them on board around this important issue. In KP province there are about 41,000 elected public representatives at the union council level throughout the province who could be effectively engaged in the program. These elected members can help in convincing the male partners in their respective communities about the benefits of family planning. He also highlighted the importance of education as an overarching tool to improve the reproductive health indicators in the country.



Dr Najma Afzal, MPA Punjab Assembly, agreed that it was imperative for Pakistan's family planning program to involve men to address the unmet

need for family planning among women resulting in Pakistan's high fertility rate. Both elected public representatives stressed the need for better implementation of family planning program activities coupled with improved accountability at all levels.

In her concluding remarks, Ms. Shahnaz Wazir Ali, Technical Advisor, Oversight and Coordination Cell for All Public Health & Primary Health Care Programs, Government of Sindh, said that there was a need for developing a joint strategic approach whereby the Population Welfare and Health Departments and the public and private sectors work together in improving access to family planning services and reach out to men with services that they need. She also said that better monitoring of program activities will help in reducing unmet need for family planning. While Pakistan was not able to achieve the MDGs, she emphasized that concentrated efforts must be made to achieve the new SDGs.

Dr Zeba Sathar in her final remarks said that it is all about bridging gaps, the most important between the Population Welfare and Health Departments and between the private and public sectors. She added that a new beginning has started and we all need to join hands in this new arena. She thanked the participants, especially parliamentarians, for providing thought provoking suggestions and recommendations which will help devise the male involvement strategy by the concerned departments in the Plan of Action to be presented at the National Population Summit in November 2015.

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