



Policy and Research Paper No. 17

Men, Family Formation and Reproduction
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Introduction

Policy & Research Papers are primarily directed to policy makers at all levels. They should also be of interest to the educated public and to the academic community. The policy monographs give, in simple non-technical language, a synthetic overview of the main policy implications identified by the Committees and Working Groups. The contents are therefore strictly based on the papers and discussions of these seminars. For ease of reading no specific references to individual papers is given in the text. However the programme of the seminar and a listing of all the papers presented is given at the end of the monograph.

This policy monograph is based on the seminar on 'Men, Family Formation and Reproduction' organised by the IUSSP Committee on Gender and Population and the Centro de Estudios de Poblacion (CENEP), held in Buenos Aires, Argentina, from 13-15 May 1998.

Changes in the Visualisation of Men

According to the Program of Action of the Cairo Conference on Population and Development, sexual and reproductive health can be improved by promoting women's rights and men's involvement in reproductive matters. To encourage changes in men would be a critical issue, since they exert power positions in many areas of life: from personal decisions related to family size, to political and programme decisions at the governmental level.

The Program also states that in order to achieve harmonious relationships between men and women, their knowledge, attitudes and behaviour should change. Until recently, the roles of men have not had a strong presence in reproductive health policies and programmes. Today, however, their participation is considered essential to reach an equal distribution of rights and duties between men and women, in connection with human and social reproduction and family formation.

Every day it seems clearer that the role of men in reproductive health begins with sexual issues but also includes contraception, pregnancy, delivery or abortion, and child rearing. It is also obvious that men's behaviour changes throughout the different stages of life, adjusting to different circumstances and varying in accordance with cultural, social and economic environments. Advances in knowledge as well as recent courses of action followed by several international agencies illustrate the increasing interest raised by this matter.

Special efforts should be made to emphasise men's shared responsibility and promote their active involvement in responsible parenthood, sexual and reproductive behaviour, including family planning, prenatal, maternal and child health, prevention of sexually transmitted diseases, including HIV; prevention of unwanted and high-risk pregnancies, shared control and contribution to family income, children's education, health and nutrition and recognition and promotion of the equal value of children of both sexes. Male responsibilities in family life must be included in education of children from earliest ages. Social emphasis should be placed on the prevention of violence against women and children (United Nations, Program of Action, 1995:197, paragraph 4,27

Feminist demands (aimed at reaching more egalitarian conditions that would allow for the independence of women), have also led to the reconsideration of both men's and women's role in reproductive functions. The new gender-based perspective has questioned that women have an innate instinct that makes them wish to have children whatever their personal projects. Likewise, feminism has questioned that fatherhood is merely synonymous to men being the economic suppliers and to becoming emotionally distant from their children. Feminism has also led to the encouragement of men to assume their reproductive responsibilities. Despite this change in perspective, little is yet known about men's reactions when faced with these major issues put forth by the feminist way of thinking. Men may either acknowledge the significance of these changes, keep cautious in view of the implications they may exert upon their social role, or reject them considering they are exaggerated complaints from groups of activists.

After reviewing experience gathered in Mexico through the observation of groups of men formed to explore different aspects of masculinity and generic relationships, it was concluded that men who are able to ponder these issues make slow progress, and their reluctance decreases at a very slow pace. Men sometimes experience these transformations as a loss of privileges and prerogatives.

In keeping with feminist advances, reproductive rights defined in terms of international agreements mean the right of women to self-determination in connection with sexual and reproductive decisions. Even when some of the components, - such as the freedom to choose the number children to bear and the spacing between each child, together with the possibility of accessing information about family planning and health care services - would seem applicable to both men and women, the notion of men's rights in the reproductive environment is still emerging.

Social coexistence governed by a code that recognises human rights involves assuming responsibilities with respect to everyone else's development. In the sphere of human reproduction, men and women show a differential practice of their responsibilities. One of the current problems to be solved in the field of sexual and reproductive rights is the need to establish definitions that include men's rights without ignoring women's rights to fairness and self-determination. This implies the consideration of this problem as an interactive negotiation between men and women.

For many years, demography has focused its efforts on describing and comparing the fertility of populations and on assessing the distance to be covered in order to reach certain family planning goals. The reference population has always been women; at most, men have been included as one of the contextual factors accounting for women's fertility. Consequently, the role of women in biological reproduction and child rearing has been emphasised, and men have been included in the scenario as mere economic supporters.

More recently, population studies have dealt with new issues connected with reproduction. Reproductive decisions have begun to be interpreted as the result of power-based relationships within the human couple and within the social and cultural environment in which they live. The excessive emphasis on women's responsibility in contraception, pregnancy and child rearing, that neglected information about men, is now changing. It is assumed that ascribing the reproductive responsibility to women alone results not only from a biological reality, but also from the social interpretation of such reality. Therefore, fertility descriptions based only on biological premises that associate child rearing solely with women are being abandoned for ideas which describe the joint nature of conception, integrating men and their context into demographic studies.

The theory of demographic transition was applied for decades to 'account for' changes in fertility patterns. Critics of this theory have pointed out its over-simplification in explaining changes, and have dubbed as rather coarse and normative its efforts to unify fertility and mortality data from the whole world. As a response to such criticism, more specific studies have been undertaken, accounting for the variety of reproductive roles found both in men and women within different cultural environments.

The inclusion of models and methodological tools from other disciplines such as economics, anthropology and sociology has also contributed to re-orienting concerns towards men and their relationship with women. Progress has been made towards understanding biological and social components in childbearing and child rearing, and towards understanding conflicts and bargaining within couples in fertility issues. Attempts have also been made toward understanding the broader context of fertility decision-making, leading to the inclusion of men as well as the extensive family or social groups that may be influential in reproductive decisions.

Methodological reasons have usually been claimed to account for the exclusion of men in studies on reproductive behaviour. It has been argued that men's reproductive period is not as clearly defined as that of women; that it is easier to interview women who stay at home; and that children who cannot live with both parents are likely to live with their mothers. Although there still is some economically or organisationally based reluctance leading to the exclusion of men as the informers on reproductive issues, this trend tends to revert. In recent years for example, the Demographic and Health Surveys have included men as informers on reproduction, and there is an increasing interest in comparing the results of their answers with those of women.

In a comparative study of DHS carried out in 13 African and 2 Asian countries from 1987 to 1993, a high response rate from men may be observed (about 80%). In many countries men declared being aware of more contraceptive methods than their wives; the difference between men and women in the way they intended to use contraceptives is not as high as expected; and both groups wish a similar number of children (with the sole exception of West African countries).

Finally, the requirements to re-conceptualise the role of men in the reproductive processes are the following:

- To expand the horizon to include the theoretical, conceptual, analytical and methodological contributions from various disciplines, bearing in mind gender-based perspectives, which include changes in the role patterns ascribed to men and women within different social and community environments, as well as in family arrangements.
- To produce greater systematic evidence from men's perspectives on any issue involving their sexual and reproductive health, such as sexuality, the reproductive process, the use of contraceptives and healthcare systems, relationships within the couple, family formation, reasons to have children, and ways of practising fatherhood, among others.
- To define sexual and reproductive rights for men, equivalent to those of women and linked with women's rights to equality and self-determination, so that both may complement rather than oppose each other.

Men, Masculinity

Sex and gender are different matters. Sex is biologically determined in conception and is expressed through physical traits, whilst gender refers to social expectations as to the behaviour of each sex. Attributes that are assigned to femininity and masculinity depend on specific social and cultural backgrounds.

On account of variations throughout social and cultural contexts, it is difficult to determine the universal attributes that define masculinity, but the control and practice of power may be considered a relevant component of the attributes of the masculine gender. The dominant position of men in many societies is based on ideologies that legitimate their actions. Such power is also expressed in sexual rules and practices, and operates through multiple social institutions, such as law, religion and marriage.

In many societies, the perceived superiority of men is rooted in the symbolic dominance of religion. Although most religions try to convey a sexually neutral idea of God, in fact the representations of God and the main prophets are usually masculine: Moses, Christ, Mohammed and Buddha are all men.

The roles of men in the family are closely linked to the attributes of masculinity. A look back into the past could be useful to understand this. At the beginning of the century, a British observer of South American culture depicted in his work the existing patriarchal system and the variety of sexual arrangements. Among social sectors of Buenos Aires, Rio de Janeiro and Sao Paulo considered educated and mentally progressive by the author, he highlighted the persistence of patterns of behaviour established by the Moors in the Iberian Peninsula: a passive, semi-oriental attitude in women and the prevalence of irregular polygamy among men. Women remained in their mother's home and later moved to their husband's, whilst conditions for men were more flexible, and they were allowed to keep a lover without losing public respect. Prevailing social rules directed men towards establishing their own family, but their masculine ties and friends spurred them toward sexual intercourse outside marriage. Many Latin American societies have retained such conventions up to now, whilst in others changes are only recent. In Middle-Eastern countries, where these rules are deeply rooted in religion, changes are estimated to take place at a slower pace.

As previously mentioned, culture and habit determine gender-based roles both in men and women, generally assigning men patriarchal attributes of dominance and power over women. Many cultures socialise their male children to be aggressive and competitive and train their female children in non-violence and, frequently, in the passive acceptance of masculine violence. Young men are impelled to adhere to codes of bravery and fierceness that force them to compete and fight, to hide their emotions and to be self-sufficient. In many cultures, manliness requires achievements, and the acknowledgement of the social group.

Many theoreticians of children's development in the West assert that gender-based identity is rooted in early experiences. In the male child, it involves establishing some distance between his mother and himself through his identification with a masculine figure that allows the child to ascertain he is not feminine.

In adolescence, when identity is solidified and tested, alternative masculine models might be sought. In a recent study carried out simultaneously with adolescents from two great cities, Chicago and Rio de Janeiro, who were related to service agencies or special programmes and belonging to low-income or marginal areas (on account of ethnical characteristics in Chicago, and poverty in Rio), exaggerated masculinity models were observed, which included violence, acceptance of risk and tough attitudes towards women. These youngsters share poverty or stressful family situations; biological parents are often substituted by other relatives, and they are all in contact with violence and gang operations.

Thus, Chicago low-income adolescents report a prevailing idea of masculinity which is violent, tough, and associated with gangs. In the 'favelas' of Rio, they reveal that the notion of masculinity among adolescents of the same age reproduces the hegemonic masculine condition prevailing in their context: man is a sexual aggressor scarcely involved in reproductive matters, and is violent toward women under certain circumstances. In both cities, youngsters under study declared that the requirements to be considered a man are becoming sexually active and financially supporting oneself and one's family. Some adolescents from Chicago also expressed it was necessary to get away from their mothers: '[to be a man] you gotta go away, see how the environment is and get away from our mother...try to be a man by yourself' (Puerto Rican youth, 17).

For both groups, becoming a man is a public act that requires acting in a way that is clearly not seen as feminine and being defined as a man by his group of peers. So the younger ones are pressed to become sexually active and pick up women, and the older ones to get a job and keep it. Pressure to be employed is higher in Rio and among Hispanic boys in Chicago: they often tell about their unemployed fathers leaving their families and indulging in alcoholism.

The group of peers, to which boys are more susceptible than girls, is often a substitute of the parental figure. They can be tough, hypermasculine groups in which feminine characteristics, friendship with girls and child rearing are criticised. Sexual conquests are prioritised and men that stay away from the established pattern can be dubbed homosexuals. The group is a space characterised by mistrust, competence and criticism, and belonging involves depriving oneself from speaking with sensitivity and reinforcing one's own tough and sexist aspects. For these young men, the relationships between men and women are characterised by stress and conflict, the exchange of goods and services, and crossed demands for attention and money instead of love, seduction and negotiation. The study suggests the possibility of overcoming such determinations by finding alternative groups of peers where these adolescents may talk about their personal problems, find someone that allows them to identify with a different form of being a man and strengthening a forward-looking vision of masculinity.

Attributes related to power and to the systematic ignorance of feelings which are applied to masculinity, can also be found in middle class sectors. A recent study carried out in Buenos Aires City among young middle class men reflects the social representations of masculinity within this context. These young men are able to differentiate between the concept of male and that of man, applying different attributes to each of them. The term "male" is associated with an extreme version of man (macho) who imposes his rules, exerts the power, and may even be arbitrary. On the other hand, the term "man" is associated with more civilised aspects such as maturity, politeness, and creative principles associated with fatherhood or being married. It is also associated with metaphors highlighting manly traits in individuals, such as "to wear the trousers" or "to be a man hairy in the chest", that are traditionally applied to men. According to this viewpoint, a man would be a male tempered by rules of courtesy, and with a more thoughtful attitude to the world. Neither the term male, nor the term man was associated with feelings, and no affection or rejection was involved.

In Middle Eastern countries, with a long tradition of patriarchal institutions, only a few studies on men allow confrontation of the existing stereotypes of masculinity. A study carried out in Egypt in 1997 which explores different aspects of socialisation among male adolescents, provides some data conjectures as to the orientation of changes induced by the expansion of and the economic and cultural transformations caused by globalisation. These youngsters are scarcely informed about sexual and reproductive health: they face puberty immersed in a culture of silence; they don't talk with their parents or friends, and do not receive any information at school; plus they have only a very elementary level of information about sexually transmitted diseases, condoms, and contraception. During their daily activities, they enjoy more spare time and freedom than their female peers. They will face marriage with some contradictory ideas about gender-based equality: they agree that women may have the same educational level as men, but they will not accept that their wives have the same educational level they have. 25% of them expect to have a 'loving and understanding wife', but very few were willing to share with her the household chores. Also, contradictions were noticed in relation to what boys and girls wish as an ideal spouse, that would lead to reinforce segregation into generic roles within marriage. However, increasing changes in the real-world economy requiring a double income to support the family may reverse this trend.

Masculinity is often perceived as a source of power, therefore paving the way for violence against women. Men enjoy greater sexual prerogatives that sometimes allow them to exert sexual duress and violence. International agencies and non-governmental organisations devoted to human, sexual and reproductive rights have acknowledged the prevention of violence against women as a major concern. According to a report published by the World Bank, rape and domestic violence account for 5 percent of healthy lifetime lost by women in their reproductive age in developing countries. Low-income young men from Chicago describe violence against women as part of a wider context in which both sexes are violent: they claim that women often give rise to violent attitudes, either by not respecting a male's temper or by slapping them. From what they observe in their environment, adolescents in Rio's 'favela' conclude that sexual aggression is an attribute defining manliness, and that domestic violence is admitted when men are able to fulfil their economic duties, but women are unable to do their domestic chores. Referring to themselves, however, these young men consider violence against women is unacceptable and a trait of cowards, even though they acknowledged having been violent sometimes.

Research on these issues has started only recently, and is more focused on violence rather than on its specific consequences, such as unwanted pregnancy and abortion. Some studies have attempted to offer representative estimates. Thus, the demographic survey carried out in Egypt in 1995 showed that one out of every four married women had been beaten by their husbands at least once, and some of them reported they had been beaten during pregnancy.

Male Sexuality

The AIDS pandemic has focused social research on sexual behaviour. Lately, a large number of studies have examined men's sexual behaviour, especially in countries where HIV/AIDS had a great impact on the population.

Usually, men enjoy more prerogatives than women to start and negotiate sexual relationships, and multiple partners are more frequent among men than among women. Undeniably, men may be considered more active in terms of sexual activities, if we are to consider premarital experiences, multiple partners and the use of commercial sex.

In Thailand, a country where AIDS has had a very rapid expansion, the double standard with respect to men's and women's sexual behaviour - so generalised in many cultures - is very prevalent. Whilst women are expected to have sexual relationships solely with their husbands, both married and unmarried men enjoy the freedom to have sexual intercourse with other women, and the supply of commercial sex is very high indeed. In a recent study carried out in Chiang Mai, a region with a high incidence of AIDS, almost no women were reported as having extramarital sexual intercourse, whilst the vast majority of men reported having sexual intercourse with prostitutes and non-prostitutes, before and after marriage. These men are usually driven to sexual initiation by friends and drink, when they are aged 18 to 20, and initiation occurs before marriage and with experienced women, especially prostitutes. Regular sexual intercourse with prostitutes and non-prostitutes is frequent. With AIDS expansion, contact with prostitutes is being slowly substituted by temporary partners; however, the use of condoms is not yet widespread.

Another recent research carried out in rural Gujarat, India, shows that men and women agree that sex is wanted and enjoyed by both parties involved, but they believe that the sex urge is stronger in men: women can control their sexual urge for longer periods of time, which is more difficult in the case of men. A higher frequency in men's sexual intercourse is therefore attributed to a greater urge for sex, whilst a lower frequency is linked with the perceived loss of strength due to the wastage of semen, a drop of which is considered to be equivalent to 50-90 drops of blood. Unlike most men studied in Thailand, most Indian men in this research experience their first sexual relationship when they get married, a fact confirmed by other studies carried out in India and which is closely related to a tradition that severely condemns sex outside marriage. Nevertheless, a growing acceptance of extramarital sex may be noticed: more than 25% of the men studied had had sex outside wedlock, especially the younger ones with a more liberal approach.

The number of sexual couples is often associated with masculinity. Comparing reports from four Latin American countries (Brazil, Peru, Dominican Republic and Haiti), practically half of the unmarried men and a considerable proportion of the married men surveyed (between 6 and 29 %) reported having had two or more sexual partners in the previous year. Haiti is an extreme example of the risk in developing and transmitting AIDS, a country where the proportion of men reporting two or more partners is the highest, most do not use a condom, and half of them consider themselves at a low risk of developing AIDS.

The Role of Men in Family Planning

Many service organisations are becoming aware that human reproduction involves two individuals and that contraception may play multiple roles other than preventing pregnancy, such as preventing diseases and freeing from reproductive concerns during sexual intercourse. These are all good reasons for dealing with the role of men in contraception. A 1995 technical report from UNFPA indicates that: 'men are de facto involved in fertility, and they have an important role in contraceptive decisions. The support of men for women throughout their reproductive lives, e.g., before, during and after delivery, during breast feeding and when women are experiencing serious conditions, such as malignant or chronic gynaecological problems, and before, during and after an interrupted pregnancy (voluntary and spontaneous abortion) is crucial as well'.

It is often believed that men are misinformed about fertility control. However, recent studies show that they usually are as well informed as women about contraceptive methods and, although they possibly do not know so many female contraceptive methods as women do, they are sometimes more informed about male methods than women are. At any rate, there are practically no studies on the way men acquire such knowledge, and very little is yet known about how and where they get information on reproductive matters.

Although the reluctance of men to attend to family planning services is well known, there is evidence that this trend is beginning to change. In Africa, for example, men report higher levels of contraceptive use than women. The use of condoms plays a significant role in explaining this gender gap, though it may also occur that men exaggerate its use while women conceal it. The important issue is that men in Africa are involved in fertility control. Men have felt their traditional roles endangered by family planning services orientated mainly toward women, offering them up-to-date contraceptive methods which were not offered to men.

The rate of vasectomy may also be an indicator of men's involvement in family planning. The ratio between sterilised women and vasectomised men is almost universally skewed toward women with tubal ligation. In 1987 in Mexico, for example, there were 27.6 sterilised women for each vasectomised man. With the introduction and promotion of better procedures (the non-scalpel vasectomy techniques) this ratio decreased to 11.6 in 1993.

Another indication of the increasing involvement of men in fertility control is the information men have on abortion: in several Latin American cities, between 32 and 60% of the men surveyed reported that their partners had had an abortion.

There is a need for reproductive health services for men, including contraceptive provision and information, STDS (including HIV) testing, prevention and counselling services, prostate and testicular cancer checks, infertility treatments, as well as other needs that affect the male reproductive system. Men's specific needs should be satisfied in a culturally sensitive way.

Another frequent belief holds that men do not take responsibilities in fertility control. The use of contraceptive works as a simple indicator on this issue: married men report the use of contraceptive methods as frequently as married women and, in many cases, the corresponding rates are higher for men. Withdrawal, condoms and periodic abstinence - coitus-dependant methods – are often used by men to prevent pregnancy. It should be taken into account that, before the pill and other female methods appeared, most contraceptives were male-controlled and that, though contraceptive technology has advanced, male methods are always the same. Although there is evidence of the active role played by men in fertility control, very little is known about their involvement in other reproductive responsibilities such as the economic responsibilities derived from unwanted pregnancy.

The idea that men constitute a barrier for the use of contraceptives by women is rather widespread and is the reason that fostered the inclusion of men in demographic studies. One of the basic assumptions is that men encourage birth, that they want more children than women. However, many studies carried out in developed countries show that men approve contraception in a high percentage. A 1987 review shows very little difference with respect to the ideal size of the family between men and women considered as a group. Another review carried out in 1996, this time over 17 countries in Africa and Asia, shows wide variations between countries in connection with the number of wanted children both by men and women. Yet, there is very little gender-based difference on the number of wanted children, except in West Africa (with high levels of polygamy), where the number of children wanted by men exceed those wanted by women by 2 to 4 children. At an aggregate level (men and women considered as groups) there is not much difference in family size preferences, but disagreements were found within couples themselves. For example, studies carried out in Malaysia and Taiwan during the eighties showed that congruence between men and women overall regarding family size preferences and even regarding sex preferences was high, but agreement was low among couples. In a wide review of couple studies carried out in 1996 with data from developing and developed countries on a variety of reproductive measures, spousal agreement on subjective matters ranged from 60 to 70 percent. Disagreements within couples may be explained by failure in communication rather than by the active opposition of the men to the use of contraceptives. Although many studies show a positive association between communication between spouses and the use of contraceptives, they present methodological problems that require further research on communication within the couple about sexual and reproductive issues.

The role of men in reproductive decision-making constitutes an area of knowledge that may cast some light on their behaviour in contraception. Theoretical models have been designed, mainly in USA, to focus on how disagreements are solved and which is the specific mixture of wishes and characteristics in the spouses affecting reproductive behaviour. Other more descriptive studies pose the question of who plays the main decision-making role, who starts the use of contraceptives, and who finally decides on specific matters. In this connection, it should be noted that the decision-making process is a fairly complex mechanism that cannot be summarised in a single

question, and that the process itself should be differentiated from the implementation of the decision taken. Finally, the fact that men's decisions on reproductive matters prevail over women's, does not necessarily imply an impediment for women to use contraceptives; in fact, many women use them without men's consent.

World Fertility Surveys and Demographic and Health Surveys have provided information about representative samples, enabling cross-country comparisons. Comparative surveys reveal the existence of dramatic differences even in regions with cultural similarities, showing that excessive generalisation on reproductive matters entails serious risks. The cultural environment of a couple's dynamics and the prevailing gender system in particular, account for behaviours related to fertility.

In research carried out in 5 countries in Asia - India, Pakistan, Malaysia, Thailand and the Philippines - different communities were compared, grouped according to their gender stratification, taking into account women's empowerment and the communication flow between husband and wife. Within these communities, the agreement reached by the couple about having additional children and the use of contraceptives was measured. Both countries and the communities grouped within them represent different gender-based backgrounds. Researchers started from the assumption that in more gender-stratified, male-dominant societies, men's preferences in fertility matters prevail (with little disagreement between the members of the couple since tradition is not questioned, women are influenced by husbands or else are afraid of expressing their opinions); and that, in more gender-egalitarian backgrounds, men's influence is lower. Evidence gathered shows that there is a certain relationship between the gender context and the agreement between spouses as to preferences in fertility matters and the use of contraceptives. There is higher agreement between spouses about having additional children in India and Pakistan, which are more gender-stratified, male-dominant countries, than in Malaysia, Thailand or the Philippines. And yet, inside these countries, just a few occurrences of this relationship between gender contexts and fertility preferences could be found in the different communities. Consequently, it may be said that the relationship between gender-based stratification and agreement between husband and wife in relation to having additional children, is a complex one. Except in the Philippines, it was determined that the more gender stratified a country is, the less effective were the wives' preferences on fertility to define the use of contraceptives than those of their husbands. Also inside the countries, the more gender stratified the community, the more prevailing husband's preferences on the use of contraceptives were over their wife's, with rare exceptions like Hindu women in Tamil Nadu. All of this confirms that men's role in fertility decision-making is strong in patriarchal societies, but tends to diminish or disappear in more egalitarian environments, especially when fertility transition advances. Consequently, in more gender stratified countries, husband's preferences do not properly attest for the proportion of women with unmet needs (i.e. women who do not want any more children, and yet do not use contraceptive methods). In these countries, only a few women would openly oppose their husband's decision of having more children. We may think that as countries reduce gender stratification, and disagreements inside the couple start to arise, men's opposition to contraception could play a major role in accounting for women's unmet needs. However, the Philippines case does not confirm this assumption: although it is a country with low gender stratification levels, high levels of disagreement between husband and wife as to fertility, and high levels of unmet need and husband's disagreement with their wife's fertility wishes only accounts for a mere 10% of the latter's unmet needs.

The process of demographic transition - the course followed by country populations until they reach low fertility and mortality rates - is largely associated with changes in the quality and structure of contraceptive demands in their populations. Pre-transitional societies show a high fertility curve, while the demand for contraceptives is non-existent. During the early stages of transition, there is an increase of motivation to control fertility more than a dissemination of contraceptives. In the full spate of transition, the demand for birth control is satisfied to an even higher degree. And by the end of the transitional period, the use of contraceptives fulfils all demands, leaving only a small amount of unmet needs for family planning.

Every country in the world holds people with unmet needs, although these seem to be higher at the beginning of the demographic transition, when fertility ideals are changing while reproductive behaviours stay the same. In order to understand women's unmet needs in Sub Saharan African countries, (where there are still high levels of fertility in spite of a relative demand for contraception) not only women's perspectives and behaviour should be observed, but men's and couples' as well. Gender-based differences and segregation; conjugal arrangements (marriages controlled by their original families, big differences in age, polygamy, natural children); and the household organisation (a responsibility shared by big family organisations linked by lineage), all these suggest that reproductive decision-making involves a complex process including different motivations for men and women, and heterogeneity between husband and wife in connection with this issue. In an analysis based on the most recent data delivered by Demographic and Health Surveys from Burkina Faso and Mali, tested against data from Ghana, specific fertility levels and demand for children and for contraception in men and women were compared, and the consistency of expectations and agreements among spouses was reviewed. In Ghana, a country that is entering into the demographic transition, there is an increasing preference for smaller family size, the demand for

contraceptives is significant in men and women, and a major proportion of couples agree on family planning. In Mali and Burkina Faso, the ideal of a big family still prevails, and although the wish to allow spacing between each birth is present, only a few men demand that births should be limited. Only a small number of husbands agree with family planning, although there is an increasing proportion who intend to use contraceptives in the future, which is an indication of conceivable changes in younger generations. In the three countries mentioned, men play a significant role in innovative behaviours. The use of contraceptives increases when husbands agree upon the family control project, even when wives may have other preferences. Furthermore, only a few wives would use contraceptives when husbands disagree with this viewpoint.

In Cameroon, a country with a high total fertility rate (5.8 children in 1990 according to data provided by the Demographic and Health Survey of 1991), couples living in the same dwelling unit were also surveyed. Couples with traditional attitudes and norms (that have low educational levels, living in rural, underdeveloped areas with a high predominance of polygamy and traditional religions), agree in their rejection of family planning. Couples that are considered modern (with a higher educational level, and living in urban and more developed areas), discuss family planning matters and agree to adopt contraception. Transitional couples - divided practically by half between rural and urban areas, and between polygamous and monogamous couples, and more educated than traditional couples -, although they may have discrepancies, are beginning to discuss family planning issues, with women usually adopting contraception in spite of men's opposition. This study suggests that changes in social and economic factors such as education cause changes in attitudes towards fertility and family planning. Additionally, it was found that women emerge as the main actors of change, and that women in modern areas are in favour of family planning while men remain linked to high fertility.

In a survey mentioned in previous paragraphs concerning Latin American countries where fertility is declining, it may also be observed that there is a match between these countries' development levels and men's behaviour towards fertility and contraception. In Brazil - a country with the highest per capita income, the highest urban concentration and the highest educational levels among the four - the male fertility rate is 3.1 children. In Peru and the Dominican Republic, which are midway in relation with these indicators, the rate is 3.5 and 3.6 children per man respectively, while Haiti - the least developed country among the four - has a male fertility rate of 4.4. Men report higher fertility levels than women, particularly in the Dominican Republic and Haiti, countries where men have the highest number of sexual couples. There is a wide variation in the use of contraceptives, with men from Brazil (73.4%) and from Haiti (32.4%) placed at the extremes of the range, while men from Peru (66.6%) and the Dominican Republic (66.7%) show values closer to those of Brazil. Both in Brazil and the Dominican Republic the majority of men claim they use female contraceptives (the pill, IUD and sterilisation), and in Peru and Haiti, periodic abstinence and other methods play a significant role. Condoms are scarcely used by men in these countries.

As we can see, comparative studies have made advances in prior knowledge on the reproductive behaviour of men and women; however, there is still a long way ahead to reach a better understanding of the differences in behavioural patterns of men from different countries and communities. More advances should be made in connection with the methodology used for interviews and questionnaires, allowing for identification of critical traits in specific backgrounds.

Family Formation

Transition to adulthood is made up of a series of linked events, in which forming a new home together with the ending of the education and the beginning of a professional career, are the outstanding points marking this biographical stage. The formation of a new family is a crucial event in the reproductive process, that generally concludes with a new childbirth.

Italy, a country that differs from northern and central European countries in terms of lower levels of separations and divorces, shows stability in marriage but a strong drop in birth rates, possibly due to the delay in family formation as well as in childbirth. This is revealed by a survey of men aged 20-49 carried out within the Fertility and Family Survey framework. According to this survey, family formation in younger generations is being delayed, and the age of entering the first job, the first marital union and the first childbirth are separated by a 5-year period between each event. Both massive dissemination of high school and university education, and the search for a stable job, seem to be causing this delay. Italy is considered a conservative country with respect to family formation: only a few men would declare de facto unions, half of which end up in marriages. Traditions and values that stem from religion and especially from matrimonial institutions still have a strong effect on these men's decisions to cohabit. The few men who have experienced consensual unions are graduates living in northern Italy, are not religious and more often than not, are divorced. The majority of married men have celebrated a religious marriage.

Several surveys demonstrate that there is a close connection between men's economic situation and union formation. The transition towards marriage is considered jointly with the transition to be employed. Uncertainty as

to the adult economic role has a negative impact on the possibility of getting married. In certain developing countries, temporary migration due to working reasons is a frequent condition, and has a strong effect on men's life course transition and, in some communities, is an outstanding event marking their transition to adulthood. The case of migrant men from Western Mexico confirms that temporary labour migration is a disruptive event which delays the formation of new unions while they are living abroad, although when returning home the formation of a new home is easier, provided the trip was successful enough to accumulate enough financial resources. Another cause for marriage delay lies in the imbalance between the sexes, since men's migration raises the relative supply of women in their community of origin, lowering the pressure on men to get married. The relationship between family life and world-wide migration in men from Western Mexico is fairly complex: age at marriage is stabilised at 24 years in the various cohorts, in spite of social and economic changes and recurrent financial crises. Among these men, migration to the United States is a major economic strategy which enables them to achieve their family formation goals. Furthermore, increasing participation of women in the labour market, which enables them to make economic contributions to the new home, has also contributed to keep the average age of union at 24 years among these Mexican men. For men, the moment to get married is affected not only by their economic condition but also by their economic potential in the long term, and it is at this point where their educational background plays its role. The number of years of education achieved is a major determinant of men's chances in the labour market. Among men in Western Mexico, those with a lower number of years of education (0-5 years) have limited job opportunities, mostly related to agriculture or menial jobs in urban settings. Thus, for them getting united at an early age does not jeopardise their labour possibilities in the long run, since they have no chance to make social progress. Men with intermediate levels of education (6-11 years) are better positioned in terms of occupational perspectives, but they depend on their ability to find a stable job. In these cases, getting married at an early stage is against their expectations of making social progress, since they are forced to interrupt their training or their first job experiences. Men with more than twelve years of education form a privileged group, with definite job opportunities and promising career paths; consequently, they are able to get married at an early age without jeopardising their long-term economic projects.

Forming a marital union implies assuming adult responsibilities related to the economic maintenance of the new home and child rearing. The economic crisis that has affected the majority of developing countries recently is creating new family models with respect to the home economic contribution. In many societies, a new concept involving two or more family providers to the home is now emerging.

Men at Home, Fatherhood, Child Rearing

In the metropolitan area of Buenos Aires City, Argentina, the model of man as the sole economic provider decreased 23% from 1980 to 1994, and the two providers model increased by 68%. The most important factors driving the change have been the growth of female labour force and of men's unemployment. Although the effects of these changes upon family dynamics are yet unpredictable, they give rise to the question of the extent to which women's dual roles (being the economic providers, and responsible for household and child rearing) will be shared by men. According to a study carried out in Argentina on middle-class couples, where both members contribute to the household economic maintenance, it is easier for men to share the parental role than to share in housework. Anyhow, these men are sharing somewhat more housework and much more childbearing responsibilities than their own parents did thirty years ago.

Within the family dynamics, the economic provider and head of the household roles have usually been assigned to men. Yet, this is not true with child socialisation and care. In most societies, and for a very long time, women have assumed these responsibilities, both towards their sons and their daughters.

A report by UNICEF published in 1998 says: 'Men's self image as nurturing people who can care for children (and spouses) should be enhanced in any possible way. Such improvement in self image might lead to reductions in violence within families as well as to increases in benefits for children and mothers'.

The inadequate participation of fathers in child caring and socialisation is associated with cultural beliefs that stereotype gender-based behaviours. However, global media messages and modern ideologies are introducing changes in the notion of what it is to be a good father, and what are men's roles in the home.

This is not free of obstacles: what in some social environments is called 'new parenthood' (e.g. fathers involved in delivery room procedures, diapering and increased nurturing of children at all stages) might lead to stresses and strain. Men's performance in areas that have traditionally been within women's domain may lead to negative feelings in other members of the community. As an example, it is usually hard for men to get permission from their employers to take care of their children, or else they may be criticised by their friends or by other members of the

family for extending their role beyond what is socially accepted. Sweden, a leading country renowned for its 1974 legislation which granted labour leave alternately to both parents during the first months of child rearing, encountered difficulties in overcoming these problems. Not all men showed the disposition required to develop the intimacy and emotional involvement with children that is usually found in mothers. Some Swedish scholars currently reviewing this problem point to the need of setting up models in which fatherhood becomes compatible with intimacy and manliness.

Several authors agree that children's emotional and physical relationship with their fathers has a major impact on gender-based equality and inequality. In families or social groups where a closer father-son relationship is possible, hyper-masculinity is less noticed. In large cities, men have less time to devote to their children, and although many have come closer to the 'new father' ideal, it may also be noticed that there is a high proportion of divorced fathers who stop paying alimony, put little effort into maintaining a close contact with their children, ignore their mate's pregnancy or else leave their children to the care of single mothers.

The study mentioned in prior paragraphs (focussing on young middle-class men in Argentina), revealed that their notion of 'father' is partially coincident with the idea of 'new father' regarding the possibility of expressing affection or emotional involvement towards their children, but not in relation to the day-to-day performance in child rearing. For these young men, the social representation of 'father' is made up of such attributes of affection as love, understanding, companionship, friendship, confidence, etc., and of attributes related to care, protection and the perpetuation of lineage such as responsibility, stability and legitimacy. At the same time, their manifestations entail a wish to achieve a state of equilibrium between authoritative and permissive attitudes towards their children, which beyond 'pure affection' enable them to mark limits to their children's behaviour.

Adolescents from lower social areas in Rio and Chicago find that being a father is the opposite of what their fathers were. Just a few of them have had active and involved fathers; only a small number remember having a good time with their fathers. This is the reason why they fail to recognise themselves as nurturing fathers. It is important to offer adolescents opportunities to develop their nurturing or caring aspects, performing the role of mentors of others and providing them with a proper space for pondering on fatherhood and the meaning of being a father, through which they may find ways to challenge current gender models, and may be able to achieve those versions of themselves they truly want to achieve.

One of the emerging aspects related to the study of fatherhood is men's investment in their children. Today, demographic tendencies point to a higher number of divorces and child rearing out of marriage, which means a higher proportion of men that do not live in the same home with their biological children. This is an increasing phenomenon in developed and developing countries. For example, there is evidence of this phenomenon in sub-Saharan African countries, where a substantial proportion of school children live in homes without the presence of their biological parents.

Many men have children in more than one sexual union. In Zaire, where polygamy is illegal, 36% of men currently in unions have had at least one child with another woman. And a study carried out in Canada on lifetime fatherhood shows that more than 20% of men have experienced out-of-wedlock fatherhood.

Men may also exercise their fatherhood in ways other than biological fatherhood. Men actively father children who are not their own biological children through fosterage, informally parenting family members' children, or marrying women with children from other unions. Therefore, putting too much emphasis on biological fatherhood sometimes prevents recognition of men's real investment in children.

Men's economic investment in their children is affected by the nature of the relationship between fathers and mothers. Fathers who do not live with their children's mother are less interested in investing in those children. This may be why in many countries, child support policies are difficult to implement, especially when they have to be applied to extramarital children or children from prior marriages.

Conclusions

Technological and social changes during the second half of the century brought about transformations, especially in western societies, in terms of women's participation outside their domestic boundaries and in the sexual realm. With the introduction of the contraceptive pill, sexuality stopped being associated solely with reproduction. Women have become aware that they have equal rights with men to enjoy sex and to self-determination in these matters, while men are deprived of former justifications to exercise their power and sexual prerogatives. All of which leads to redefine men's role in family and society, and to rethink a way to transform old patterns of masculinity. It seems that current changes in men are more related to social pressures due to women's advances

and to economic pressures based on lower labour opportunities, than to deep transformation of their values and beliefs. Some social interventions like those carried out in Mexico among adult men, demonstrate that it is not an easy task to bring about such transformations, and that future actions aiming at younger men may be fruitful in future generations. A 1995 report from UNFPA concludes: 'Education can provide boys with a different interpretation of masculinity, replacing the one based on domination to one defined by shared responsibility'.

Undoubtedly, a process of deep social changes is taking place, which makes it very difficult to predict the future direction of gender-based roles. Yet, we may assert that they have changed during the second half of this century. Generally speaking, women have made some progress in terms of self-determination, and in some countries patriarchal patterns that regulated men and women's behaviour in the past were left behind to some extent. However, a significant work of social construction still lies ahead, one that contributes to the development of the next generation of mankind, where men and women are able to display more harmoniously their potentials according to their true wishes for personal growth and human reproduction, in line with the social and cultural environment in which they live.

1 Measured by the number of children ever born (CHEB), declared by currently married men at the time of the survey.

Men, Family Formation and Reproduction

List of papers presented at the seminar on 'Men, Family Formation and Reproduction' organised by the IUSSP Committee on Gender and Population and the Centro de Estudios de Poblacion (CENEP), held in Buenos Aires, Argentina, from 13-15 May 1998.

Session 1: Theoretical-Methodological

- 'Reconceptualizing the role of men in the post-Cairo era' by Axel I. Mundigo
- 'Absent and problematic men: demographic accounts of male reproductive roles' by Margaret E. Greene and Ann E. Biddlecom
- 'Work among men in Latin America. Investigation and practices, results and experiences' by Daniel Cazes
- 'The implications of the researcher's gender in the construction of data for studies on sexuality and masculine reproductive health' by Graciela Infesta Dominguez

Session 2: Approaching Demographic Research from Men's Perspectives

- 'Some characteristics of the reproductive process of males' by Juan Guillermo Figueroa Perea and Olga Lorena Rojas
- 'Problems of collecting information from men in demographic surveys: experience from the 1988 Turkish population and health survey' by Turgay Unalan
- 'Men's reproductive health: the impact of age of father on child survival' by Guillaume Wunsch and Catherine Gourbin

Session 3: Sexuality

- 'Boys in the hood, boys in the Bairro. Exploratory research on masculinity, fatherhood and attitudes toward women among low income young men in Chicago, USA, and Rio de Janeiro, Brazil' by Gary Barker
- 'Sexual contact of Thai men before and after marriage' by Wassana Im-Em
- 'Representations of sexual and preventive practices in relation to STDs and HIV/AIDS among adolescents in two poor neighbourhoods in Lima, Peru: relationship between sexual partners and gender representations' by Carmen Yon, Oscar Jimenez and Rocio Valverde
- 'Men's attitude towards sexuality and their sexual behaviour. Observations from rural Gujarat' by M.E. Khan, Irfan Khan and Nupur Mukerjee
- 'The sexuality of the Guatemalan Mam Indians and its changes with urbanisation' by Alfredo Mendez-Dominguez

Session 4: Men's Life Transitions

- 'The timing and synchronization of life course transitions among Mexican men' by Emilio A. Parrado
- 'Transitions to manhood: socialization to gender roles and marriage among Egyptian adolescent boys' by Barbara Ibrahim, Barbara Mensch and Omima El Gilaby
- 'Gender differences in attitudes toward family size; a survey of Indian adolescents' by J. Mayone Stycos
- 'Male cohabitation and marriage in Italy. First results according to the 1995-96 Fertility and Family Survey' by Lisa Francovich

Session 5: Role of Men in Contraceptive Behaviour (Decision-Making)

- 'Demand for contraception by Sahelian couples: are men's and women's expectations converging? The cases of Burkina Faso and Mali' by Armelle Andro and Véronique Hertrich
- 'Male fertility, contraceptive use, and reproductive preferences in Latin America: the DHS experience' by Edilberto Loaiza
- 'Does man actually decide in Africa? Couples strategies about fertility in Cameroon' by Amadou Noubissi and Jean-Paul Sanderson

- 'The husband's role in determining whether contraceptive is used: the influence of gender context in five Asian countries' by Karen Oppenheim Mason, S. Philip Morgan, Herbert L. Smith and Sharon Stash

Session 6: Household Division of Labour, Fatherhood and Child Rearing

- 'Being a man, being a father' by Ana Lia Kornblit, Ana Maria Mendes Diz and Monica Petracci
- 'Men and the family' by Catalina H. Wainerman
- 'Husband's household labour and reproductive behaviour. Case of Japan' by Hachiro Nishioka

The International Union for the Scientific Study of Population (IUSSP) is the foremost international professional association dedicated to the scientific study of population. Its four basic objectives are:

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