# Men in Families: exploring the impact of men and reproductive health and choices in Mexico

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Fostering greater involvement by men in reproductive health and decision making is one of the key objectives of grantmaking related to population issues.

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When a Chinantec woman gives birth in this mountainside village in Oaxaca, Mexico, the man in her life often actively participates in the process. In traditional home births, he may deliver the baby himself or act as an assistant to the midwife. 'I held her during labour, massaged her with hot oil to warm her, and collected firewood for her tea,' said one father in San Francisco, an indigenous village of 1,500. Said another: 'I gave her the birthing herb, attended to the baby, cut the umbilical cord, and did the chores before and after delivery.'

Men in San Francisco 'are intimately involved in the health of their partners,' says Kathryn Tolbert of the Population Council in Mexico. 'They are the preferred birth attendants and are rich repositories of information about herbal remedies related to childbirth. Men have extensive knowledge – down to the

details of their partners' menstrual cycles

– about pregnancy and reproduction.'

In addition to serving as labour coaches and herbal remedy specialists, men in the village are the gatekeepers – and often the barriers – to women's reproductive health services. Historically, 'men considered it their right to regulate women's health and fertility.' Says Ana Cortés, an anthropologist who lived in the community while conducting research for the council. 'Women were under great pressure to bear as many children as possible.'

With a grant from the MacArthur Foundation, the Population Council is examining the ways that men in this Chinantec town, and in several other sites in Mexico, influence the health and well-being of their families and communities. As with a similar project in India, the Population Council seeks to

understand the impact of gender relationships on reproductive health and choices, to promote healthy reproductive behaviour, and to generate men's support for women's reproductive health and rights.

## Men as gatekeepers to health

The role of men in shaping family choices is largely unexplored territory. For the past four decades, research and family planning programmes around the world have focused almost exclusively on women. This strategy leaves many needs unmet, according to Judith Bruce of the Population Council in New York. 'The inescapable fact is that women are often not carrying out their own wishes when it comes to their health, fertility, or many other parts of their lives,' she says. 'A primary reason women can't achieve their objectives is that they are not free to discuss with their partners their right

to say no, to avoid disease, to determine the number and the spacing of their children, and to receive support during pregnancy, delivery, and childrearing.'

Today, the town council, a group of 30 men who wield the authority in San Francisco, prohibits the local government-run health clinic from giving talks about or promoting family planning. Women who seek help in planning their families often do so secretly and at risk of reprisal from their partners. According to an article by anthropologist Carole Browner, who worked in the village in 1981, local men once destroyed a tree because its bark, when prepared as tea, was used by women as contraceptive.

Ask Judith Bruce: 'What do women want men to know? And what information would men like to have to better support women? These are the



Mexico: Culturally Peripheral Communities Programme

questions we are answering with this research. We're searching for information that will help men and women form a better partnership in making decisions that have a profound effect on women's health and lives and on the well-being of their families and the whole community.'

### **Procreation and destiny**

In San Francisco, as in most communities, attitudes toward childbearing have deep cultural and historical roots, says Ana Cortés. 'The community has a great fear about losing their population' she says. 'They survived epidemics that were rampant in colonial times. In the 1960s, a measles

outbreak killed many children. They've also survived attacks from a neighbouring town over land disputes. More recently, emigration has greatly reduced their population and, especially, that of the neighbouring town.

'There's a sense that many children, especially sons, are needed to sustain the town's administrative, political, and religious functions' she says, 'Procreation is seen as intimately linked to the town's history and destiny.'

Until recently, very large families were considered the ideal in San Francisco. The community places a great value on education and takes pride in its burgeoning schools. 'Children are

considered almost sacred,' says Karen Morris, who coordinated a survey of 240 Chinantec men and women. Men who were surveyed expressed their commitment to building up the town. 'We have children so the town will have enough people and so we won't be without human resources in the future,' said one man. 'Children will lend us a hand tomorrow, so that our homes won't be abandoned when we pass on,' said another.

# A community in transition

Even in remote San Francisco, attitudes about families are in transition. In recent interviews, many men said they thought two or three children was the ideal family size, though many had far more. One man with ten children said, 'Although I would have liked to have fewer, God sent me all of these.' Another reflected: 'When you're young, you don't think about the consequences of having so many children until it's too late. You become aware after having had some schooling that it is better to have a small family.'

Understanding men's perceptions about their sexuality, their partners, and their children is critical to designing effective reproductive health programmes, says Kathryn Tolbert. Although men are often reluctant to discuss their private lives, she says, they open up when they understand the project will benefit the community. 'We're finding that men in Mexico are very interested in reproductive health. They feel left out of programmes directed toward women alone. They are waiting to be included.'

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