Feminist Project Seeks to Understand Men

By Rashidah Abdullah

en are the focus of a new project of the International Reproductive Rights Research Action Group (IRRRAG).¹

This may seem surprising as IRRRAG is a coalition of feminist researchers, and women, not men, are usually involved in feminist research. After all, it is commonly argued, there is so much that is not yet known about women's

needs, perspectives and visions, that women themselves as a neglected and marginalised group must be asked and listened to first.

This was the position of IRRRAG when in 1992, it decided on its first research project on women's perception of their reproductive rights or their perceived entitlements in making decisions in the areas of childbearing, contraception, abortion and sexuality.

This necessitated asking women themselves what they thought, felt and experienced, particularly poor women who had fewer opportunities to express their views and to have these considered in the formulation of health and population policies. IRRRAG research teams in Brazil, Egypt, Malaysia, Mexico, Nigeria, the Philippines and the U.S. focused on understanding women, although in several countries some men were also interviewed.

The research findings on women's reproductive rights however, also raised questions about women's relations with men. What did women actually want of men in the area of decisions on sexuality and reproduction?

Findings indicated that some women did not want men to take more responsibility for using contraception as they did not trust their



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partners to use it as effectively as women would. These women wanted to remain in control of their own fertility. The objective of family-planning agencies to "increase men's involvement" in reproductive-health decision-making would not be a priority for such women. Women justified this entitlement to make decisions on contraception or abortion on their own by explaining that they were the ones to bear, give birth and take care of the children.

In 1999, IRRRAG embarked on its second research project on "Men's Responsibility in Sexual and Reproductive-health Decision-Making," with five of the original groups involved (Brazil, Malaysia, Mexico, Nigeria and the Philippines).

The main concern was that increased attention to and interpretations of "men's involvement" in the Cairo International Conference on Population and Development (1994) and the Beijing Conference on Women (1995) could inadvertently result retrogressively in lessening the control women had over their own fertility and reproductive decisions. There was a need to investigate the assumptions that women wanted men to play a bigger role in reproductive-health decision-making, that men also desired this, and that such a change would result in more equitable gender relations. It had been observed that often, new social policies and programme approaches were designed on the basis of assumptions that had not been tested. In addition, efforts to change men's behaviour had not been successful. For example, despite family planning programmes having a long-term objective since the mid-1970s of "increasing men's participation" in contraception by more men using condoms, condom rates remain low throughout the world.

There was thus a need to understand men better, why they behave as they do, and what they believe about their own entitlements and those of women in the area of sexuality and reproduction.

A number of stereotypes about men's attitudes and behaviour existed, which were thought to not necessarily reflect in reality the diversity of men's experience. For example, some men treasured fatherhood beginning with child-birth, but the gender stereotype is of men who do not love and care for their children as much as women. Perhaps this inadequate knowledge was related to the lack of in-depth research on men and was one of the reasons why programmes directed to men were not successful. Gender relations globally had also changed little over the last 30 years, despite the feminist movement.

An additional rationale for the research was that the concept of "men's involvement" needed to be clarified. The Cairo and Beijing conference documents did not clearly explain that the concept in these conferences was intended to be linked as a strategy to achieving gender equality and women's empowerment. Men's beliefs, attitudes and behaviour about themselves and about women needed to change as did that of women, in order to have an outcome of an equal valuing of gender differences. The roots of the concept went back to population and family planning in the 1970s, when the reason for increasing men's participation was a demographic objective of improving contraceptive usage rates and not a gender equality goal. This was one of the reasons for the confusion. Historically, it had a different meaning but although it was a new concept, the words to describe it remained the same.

Thus, although IRRRAG decided to focus on understanding men, the intention was that the new insights and knowledge gained would be for the benefit of women, not to better meet the needs of men. This is a very important distinction, as the confusion about the term "men's involvement" after the Cairo Conference has sometimes led reproductive-health programmes to interpret the objective as being to better meet men's health needs. New services for men such as prostate and testicular screening and impotence treatment have been set up in some countries in order to "involve" men in reproductivehealth services and meet their needs. Men's reproductive-health needs however are a separate concern from "men's involvement" and the two issues should not be interrelated.

The gender approach is similarly misunderstood. Instead of beginning with the concept of gender inequality—the fact that men

and women's relationships globally are characterised by unequal power, resulting in serious negative consequences for women's well-being—there is an assumption that a gender focus means that both women and men's different gender needs have to be identified and met. Addressed as a sociological construct, gender relations and gender sensitisation programmes thus become depoliticised, leaving out the element of power. Feminists who use gender relations in their theoretical frameworks need to be able to clearly explain gender relations, gender inequality and men's gender roles in decision-making as



Men need to challenge cultural expectations on the way, they should relate to women particularly on sexual and reproductive health concerns.

linked to women's empowerment, the goal of feminism.

With this background of conceptual confusion plus lack of clarity on what women want of men and what men actually think and feel about their role and women's entitlements, the following IRRAG research objectives were formulated:

To clarify the meaning of "reproductive rights" for women and for men in diverse cultural, national and social contexts, and to unravel the complex concept of "male involvement" and



Targetting men in reproductive health programmes does not mean that men merely sit around to get their own reproductive health needs met.

its link to women's empowerment and gender equality.

- ▶ To translate those meanings and concepts into a locally relevant analysis able to inform larger quantitative demographic and population studies/surveys.
- To inform international policy, programmes and projects on male involvement in reproductive and sexual health, so that interventions geared towards male involvement and responsibility promote women's equality and freedom from inequitable burdens, and do not diminish their resources or control.

The central theme is to investigate the relations between women and men in negotiating reproductive and sexual decisions, so as to elicit answers to two interrelated sets of questions.

From the standpoint of women:

In what ways do male behaviour and belief systems impact on women's choices?

In particular, to what extent do male violence and abuse contribute to women's secrecy and fear in reproductive choices?

▶ When is increased participation of men in decision-making sought or indeed desirable from women's perspective? and

Do women want more communication with men on these issues; why or why not?

From the standpoint of men:

In what ways do women's beliefs and actions impact on male behaviour?

Do men desire to share responsibility in negotiating contraception, child bearing, childcare, abortion and protection against sexually transmitted diseases?

In which matters do they respect women's entitlement, or assume women's primary responsibility? and

• In which areas do they claim primary decision-making authority for themselves, or feel their position or identity threatened by women's independent actions?

Research Methodology

As in IRRRAG's first research, this project is a qualitative action research using primarily in-depth interviews and focus group discussion. It is a predominantly ethnographic research, seeking to understand culture from people's own perspectives. An average of 180 men and women in each of the five countries have been included in the study. Of these, about one-third have involved individual interviews with men, the rest being both men and women in group interviews (or focus group discussions). Most have been low-income people, and ethnicity, age and rural-urban locations have been taken into consideration.

An innovative methodology used is the gender-interactive dialogue. Women first were interviewed to explore their perceptions of the roots of men's sense of entitlements, and find out what kind of involvement in their sexual and reproductive-health responsibilities they want from the men in their lives. Then men were interviewed, individually and in groups, to understand their own perceptions on the same concerns and also in response to the perceptions women articulated. The research team is comprised of both women and men.

Finally, as a feminist action research, the intent is to take back an analysis of the research findings to the communities interviewed and have a dialogue with individual groups of men and women and possibly mixed groups aimed to assist in the process of change in gender relations. Other advocacy actions will be planned locally and nationally to discuss, disseminate and utilise the findings to improve programmes and services for women.

Some of the specific research questions that emerged in the research planning meeting in 1999 and are being explored in the research are for example:

What are men's and women's differing expectations of parenthood? What do men invest in their children? What are the costs of fertility for men? What do men perceive as their own and women's sexual needs and pleasure? How do men and women perceive and construct masculinity and femininity? What are men's notions of self-control and control over others? What impels men to violence and what is their understanding of women's experience of violence?

What motivates men and what are the roots of self-esteem? How do men perceive and

articulate their sense of entitlement, i.e. their personal rights, privileges and responsibilities? How much of their feeling of power arises out of their construction of masculinity and femininity within this larger framework of entitlement and personhood? How do they view women's entitlements to autonomy, aspirations, rights, sexual pleasure and personhood? To what extent does men's sense of entitlement rest on a belief in a natural order, and how much is seen as, what is in fact, an unequal exercise of rights between men and women?

What are the conditions under which men feel compelled to conform, i.e., accommodate to the dominant structures of unequal power, and to the cultural norms that privilege them? And, what are those elements in these dominant structures that men feel the need to challenge or resist? And, when men question the traditional norms, how do they do this—in silence, or within the household, or in small groups, or in the public sphere?

A critical challenge for this research is to be able to elicit from men what they actually think and do-rather than a response based on what they think they should believe or do (the normative). In the first IRRRAG research on reproductive rights, it was possible to make this distinction in women's voices. For example, in relation to abortion, across countries and cultures women explained that they knew their respective religious stand on abortion and what was the predominant view. However, they were able to distinguish between community norms and their own views and values which they used in decision-making, which was explained as "a practical morality based on women's bodily suffering and social responsibility for women which usually takes precedence over religious belief and the teachings of the Catholic church or Islamic clerics when it comes to women's reproductive decision making." (Petchesky and Judd, 1998).

We very much hope that the researchers will be able to encourage men participating in this research to speak openly and honestly about themselves and men in general, and not in stereotypical and normative terms so that an enlarged reality about men's identity and behaviour will be understood and can be discussed.

Research teams in the five countries have now completed their fieldwork and are in the process of analysis and report writing. This is planned to be followed by a researcher's meeting and publications output this year and some local, national, regional and international policy and programme advocacy.

Unfortunately, despite the importance of the research globally, the UNFPA financial crisis in 1999 meant a 40 percent cut in the project budget agreed on in principle. Funds are still being raised in order to complete the project.

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Footnote:

The IRRRAG research on men includes the following groups and coordinators: Brazil—Coletivo Feminista Sexualidade e Saude (Ana Paula Potella); Malaysia—IRRRAG Malaysia—a group of researchers/activists (Dr.Siti Norazah Zulkifli and Dr Wong Yut Lin); Mexico—Cinquenta y Uno Porciento (Dr Adriana Ortiz-Ortega); Nigeria—IRRRAG Nigeria (Grace Osakue); Philippines: WomanHealth Philippines (Mercy Fabros).

The Project Advisor is Dr Rosalind Petchesky of Hunter's College, New York and the former International Coordinator of the first IRRAG project. The Research Consultant is Dr Radhika Ramasubban, Director of the Centre for Social and Technological Change, Mumbai, India.

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