The Role Of Men In Reproductive Health

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INTRODUCTION
The issues in reproductive health have been crucial and evolving landmarks in gynaecological practice. It has really been a talking point since the International Population Conference in Belgium in the year 1993. In line with this, the World Health Organization (WHO) defines reproductive health as a condition in which the reproductive process is accomplished in a state of complete physical, mental, social and spiritual well-being and not merely the absence of disease or disorders of the reproductive system. Reproductive health therefore involves people having the ability to reproduce, to regulate fertility and to practice and enjoy sexual relationships. It also means safe sex, pregnancy and childbirth. No wonder the male folks play a major role in the reproductive health process.

REPRODUCTIVE TRACT INFECTIONS INCLUDING HIV/AIDS
This is one of the specific reproductive health issues. In Nigeria, majority of persons with HIV/AIDS are females and they are mostly between the ages of 15 and 29 years. Similar reports are also found in other countries in sub-Saharan Africa. Females are at high risk of contracting sexually transmitted infections (such as Gonorrhoea, Syphilis HIV/AIDS) because of the socio-cultural pressure by the male folk. There are also the cultural traditions that encourage sex with older women. Risks are exacerbated by early initiation of sex behaviour, short-term relationships, frequent partner changes, multiple sexual partnerships and low rates of condom usage by the men.

VIOLENCE AGAINST WOMEN
This is another specific issue in reproductive health, and men have played greater roles to it. The women's lack of control over their sexuality is manifested in polygamy, rape, and sexual harassment at the workplace and child sexual abuse. The government programs aimed at encouraging monogamy and condom use to prevent AIDS are of little help to African women as long as they lack the social status to insist on such measures. Some women have believed that beatings by husbands are justified under some circumstances such as if women refuse to have sex. For some young women, sexual intercourse is not a matter of choice even when a woman is indisposed. Yet, violence against women by the men has mitigated against the reproductive health.

UNWANTED PREGNANCY AND UNSAFE ABORTIONS
Men often contribute 'lion share' in this aspect. Most births by women in developing countries are not desired, most of which involve teenagers aged 15-19 years. The emotional trauma associated to this cannot be overemphasized. Men often deny responsibility to such pregnancies. Those who accept responsibility often coerce the female into unsafe abortions that may lead to several complications. Worse still, the pregnant students are often expelled from school and a good number either will be ashamed to return or forced to marry.

CONTRACEPTION AND FAMILY PLANNING
This is also an important issue in reproductive health. Although women's access to knowledge about contraception has improved in recent times, they still lack the socio-cultural authority and economic security to practice fertility control without their partners' consent. Men often refuse the use of barrier contraceptive such as condom with their sexual partners. Due to the high premium placed on male gender, husbands have often resorted to divorcing their wives or marrying other partners since they could not give birth to a male child even when they have female children. As a result, women are cajoled and discouraged from having a more permanent form of contraceptives even when that will be the most suitable for them.

REPRODUCTIVE TRACT MALIGNANCIES
Reproductive tract malignancies are also issues in reproductive health. Men, however play vital role in this aspect. Consider for example, the premalignant lesion of the cervix, which may lead to cancer of the cervix. The risk factors of the malignant lesions of the cervix include early age at first intercourse, multiple sexual partners, promiscuous partners, and sexually transmitted infections (HIV). All these are male related.

INFERTILITY
This is another issue of reproductive health concern. In the African society, women, not men are invariably regarded as culprit. However, it must be acknowledged that with respect to the aetiology of infertility in Nigeria, the male is equally as contributory¹,³. In infertility workup, most men refuse evaluation by the attending gynaecologist in the belief that it is the wife that is solely responsible. Also, the major cause of female infertility in Nigeria is tubal damage, which is sequel to pelvic infections resulting from STIs, where men are major culprit².

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PREGNANCY RELATED MORBIDITY AND MORTALITY
This also influences the reproductive health process. Some of the causes of maternal mortality include infection, toxaemia, obstructed labour, and septic abortion. Childbearing at young ages has been associated with pregnancy induced hypertension, anaemia, haemorrhage, obstructed and prolonged labour. The men can precipitate all these by marrying very young girls.

MENOPAUSE
The problems of menopause as a reproductive health issue is well known. The remarkable age difference between husbands and wives in African setting may account for men usually dying earlier than their wives in most cases. This denies these women the psychosocial support of their partners that helps in relieving the effect of menopausal symptoms. Furthermore, change in sexual attitudes of women after menopause as a result of vaginal dryness requires an understanding and supportive husband. Unfortunately, many men resort to infidelity or marrying new and younger wives.

CONCLUSION
The role of men in the reproductive health cannot be overemphasized. The unsupportive and negative attitude of many men contribute significantly to the problems of sexual and reproductive health of their partners. There is need for re-orientation of males as regards reproductive and sexual health issues.

REFERENCES