Perception about men's need for preconception care among stakeholders in Ibadan, Southwest Nigeria – a qualitative study

Oludoyinmola O. Ojifinni

School of Public Health, University of the Witwatersrand, Johannesburg, Gauteng, South Africa

Latifat Ibisomi

Division of Epidemiology and Biostatistics School of Public Health, University of the Witwatersrand, Johannesburg, Gauteng, South Africa; Nigerian Institute of Medical Research, Lagos, Nigeria

Extended Abstract

Introduction

Several studies have shown that suboptimal health in men can result in poor reproductive health outcomes[1–5]. This is due to the occurrence of low sperm motility, longer time to pregnancy in partners and occurrence of birth defects[3–6]. The lifestyle exposures and poor health care seeking behaviour implicated in these events can be mitigated through preconception care[7,8]. Preconception care (PCC) is the provision of biomedical, behavioural and social health interventions to women and couples before conception occurs, aimed at improving their health status, and reducing behaviours and individual and environmental factors that could contribute to poor maternal and child health outcomes[9,10]. PCC services for men are however not as well established as they are for women[11,12]. This qualitative study explored perceptions about men's need for PCC and its role in improving reproductive health outcomes in Nigeria.

Methods

An exploratory qualitative study was conducted in Ibadan North Local Government Area of Oyo State, Nigeria. The study included 10 focus group discussions (FGDs) held with 22 men and 23 women of reproductive age and 12 religious leaders. There were also key informant interviews with two community leaders and 26 health workers at the primary, secondary and tertiary level of the health system. The interviews were digitally recorded, transcribed and analysed thematically using inductive coding on MAXQDA 2018.

Results

Three main themes emerged from the data: why men's health requires attention, how men respond to health care and opinions about men's need for PCC. The reasons adduced for attention to men's health include men's genetic contribution to pregnancy, the possibility of low sperm count and prevention of transmission of infection to their partners. Opinions differed on men's need for PCC: while some believed that men need PCC, others expressed contrary views stating that PCC is more appropriate for women.

Table 1 Themes, descriptions and sample quotes

Themes	Subthemes/Description	Quotes
Why men's health requires attention	Participants views on the need for specific care being given to men's health	*Also, the sperm cells of the man may not be fertile. This can be treated if it is detected during tests by the doctor.* – **Respondent 1; Married Women above Basic Education** *It is important for the man too to take care of himself before he sleeps with the woman and gets her pregnant and it is also important that they go for check-up so that either of them doesn't infect the other.* – **Female Community Leader**
How men receive or respond to health care	Description of the ways in which men present to health facilities for health care	*… men will not come out the way women will just come out and say this is what I'm feeling. You know men they will just be perambulating and until you send them for some tests, then they will come and start to ask questions after getting their results. That is when you can counsel on the issues; either low or zero sperm count.* – **Secondary Health Care Level Nurse**
Opinions about men's need for PCC	• Men need PCC	*Yes, they need it please. The reason is that some diseases occur in childhood that can cause infertility in men and most of the time they will say the problem is with the woman. So men too need to go to the hospital and check themselves, check their sperm counts.* **– Public Health Nurse; Primary Care Level**
	• Men need PCC, but women need it more	*Men also need preconception care but not as much as for women.* **– Community Physician 1; Tertiary Care Level**
	• Men do not need PCC	*Well to my own understanding, we are the men of the house and if we are healthy, we should go out and look for what the family will eat. I have to go out because if I stay at home, there is nothing to eat. I don't think men need any special care.* – **Respondent 1; Married Men Less than Basic Education**

Implication

This study explored the perceptions about PCC services for men among health workers, religious and community leaders as well as men and women within the reproductive age bracket. The findings show that while men's role in fertility is considered important, there is poor awareness of the need for PCC services in optimising men's health. However, for PCC services to be effective, both men and women's reproductive health needs must be considered.

To achieve successful deployment and uptake of PCC services, awareness about the need to optimise men's health along with that of their partners must be improved both at the community level and within the health system.

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