

Cultural norms preventing adoption of vasectomy

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Cultural beliefs and norms are making the adoption of vasectomy in Tanzania challenging.

Engaging rural couples in [family](#) planning awareness sessions could help demystify deep-rooted cultural barriers that prevent men from undergoing [vasectomy](#), a study says.

Vasectomy, a surgical procedure designed to make a man sterile by blocking his sperm ducts, is an underused method of contraception in East Africa despite being part of sexual and reproductive healthcare services, according to the study.

Results of the study published in *PLOS One* in March, which was conducted among [rural women](#) in Pwani, Tanzania's coastal region, indicate that rural men shun vasectomy because of poor knowledge, misinformation, certain religious beliefs and social stigma attached to the procedure.

"Myths and socio-[cultural factors](#) which have been identified in the study limit vasectomy use and they are similar across Africa," says Eunice Pallangyo, the study's lead author and a senior instructor at Aga Khan University School of Nursing and Midwifery in Tanzania.

Men who opt for vasectomy lose their standing in the community and are treated with contempt. For instance, they are hardly allowed to contribute to discussions with other males.

There is also the notion that vasectomy is a sin that negates God's original plan for man to procreate, says the study.

"That's why on the continent, it is taken to be like a taboo. Creating awareness about the [cost effectiveness](#) and that it is reliable would help clear the myths associated with this method," Pallangyo adds.

Tanzania's fertility rate, estimated at 4.9 births per woman, makes it one of the countries with the fastest-growing rates in Sub-Saharan Africa,

says a World Bank Group report [Africa's Pulse 2019](#), indicating the need for increased access to family planning methods.

From September 2017 to February 2018, researchers interviewed 20 rural women who were either married or were cohabiting. They were traced at health centers and hospitals in Bagamoyo and Kisarawe districts of Pwani region.

Through the interviews, the researchers found that men with a higher level of education and from well-educated communities were more likely to accept vasectomy than men with low or no education.

Factors including religion and the tendency for some men to have more than one wife were cited as barriers to adopting vasectomy.

"Why are you correcting God who planned for the birth? You are contrary to His wish, you are against good values of the religion," one of the women was quoted in the study.

Another woman added: "There might be a problem between a man and his wives because one wife or two wives may have children whereas others don't have... This may cause the marriage to break up because of conflict[s] and misunderstandings in the family."

Pallangyo tells SciDev.Net that the study provides insight that could facilitate the promotion of family planning use in the country.

"Low family planning utilization is among the key reasons why women and newborns deaths are extremely high," she explains.

"The community in general would expect only women to go to clinic for issues related to family planning.

According to the study, African women's tendency to lack primary decision-making power because of [gender roles](#) limits their ability to lead their partners in deciding to implement family planning methods.

Pallangyo says that women have an essential role to play in encouraging their partners' vasectomy uptake, but add that some women themselves were found to be barriers for men who had opted for vasectomy.

Salim Jaribu Sultan, a family planning and reproductive health program officer at EngenderHealth in Tanzania, says the study proves what was already known from practice about the barriers to family planning uptake in regions across the country and in Africa, particularly on vasectomy.

"Although the barriers mentioned in the study may vary from region to region, in Kigoma region where I have worked, I have seen many clients for vasectomy," says Sultan.

"But we should also consider training of health service providers on how to carry out the procedure [vasectomy] as well as improve their attitudes towards it."

More information: Eunice S. Pallangyo et al. Religious beliefs, social pressure, and stigma: Rural women's perceptions and beliefs about vasectomy in Pwani, Tanzania, *PLOS ONE* (2020). [DOI: 10.1371/journal.pone.0230045](#)

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