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Male Participation in Antenatal Care and its Effect on Pregnancy

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ABSTRACT

Men's participation in prenatal care (ANC) is important and contributes to better issues for maters and baby. Mother deaths remain a major burden in developing countries, including Nigeria. Lack of manly participation in gestation related care is one of the contributing factors. In numerous countries around the world, Mother and child health creation is considered to be the part of women and men who feel responsible and see no reason to accompany their mates in prenatal conventions (ANC). Manly/womanish mates are important people to support further women in parturition and their involvement in gestation, parturition and the postpartum/postnatal period has salutary goods on numerous different issues related to Mother and child health and family well-being. Men's involvement in prenatal care (ANC) is among the interventions to ameliorate Mother Health. Encyclopedically manly participation in the ANC is low and varies in low and middle income countries including Nigeria where utmost Mother deaths do. In Sub-Saharan Africa, men are great decision makers and have a great influence on the mother's health.

Keywords: Manly participation; Antenatal care; Postpartum; Postnatal; Neonatal

INTRODUCTION

Mother deaths remain a public health responsibility in developing countries, including Nigeria, and the main causes are related to gestation. Lack of manly involvement in gestation related care is one of the contributing factors [1]. Despite sweats to promote manly participation in Mother and child health, studies in low and middle income countries have reported that manly participation is still low [2]. A man is involved when "he is present, accessible, accessible, understanding and willing to learn about the gestation process and is willing to give emotional, physical and fiscal support for the pregnant woman" [3]. Substantiation highlights the positive link between manly involvement and Mother Health issues, particularly those related to the use of services, birth control, and diet [4]. The results showed that women preferred to be accompanied by their mates when they went to conventions, especially on their first motherliness visit. Men were less likely to be involved in prenatal and postnatal care.

Women regarded men as breadwinners, and their primary part in the gestation and parturition was to support their mates financially. Significant walls to manly participation were common gender places in the home, fear of HIV testing and shy placement in health installations [2]. In this study, the participation of manly mates includes a manly or womanish mate accompanying his or her partner or motherliness care (ANC), furnishing profitable support for the community and icing that all recommendations made to the ANC are complied with to cover the weal of consorts and children.

Men's participation in reproductive health services may promote timely and timely care, encourage women to give birth under the care of a qualified caregiver, and assist in identifying and seeking health care in cases of postpartum complications. However, in many African societies, pregnancy, childbirth and postpartum services have been misplaced in the community as an issue affecting women [5].

At least 10 million unintended pregnancies occur each year among teenage girls aged 15-19 in developing countries. Approximately 12 million girls between the ages of 15-19 and at least 777,000 girls under the age of 15 give birth each year in developing regions [6]. Maternal and child health promotion is considered to be the role of women and men who feel responsible and see no reason to accompany their partners when they

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visit the ANC [7]. The rational involvement of male partners in antenatal care (ANC) can have a positive impact on the health outcomes of mothers and newborns [8]. Although there is an active motivation for male involvement during prenatal care, a small number of men follow their wives during prenatal visits.

The belief that men should participate in the maternal care of their pregnant partners has gained momentum and is important due to the realization that male behavior can significantly affect the health outcomes of women and children. Various studies have emphasized how the role of men can influence the better outcomes of their pregnant women [1]. The importance of promoting sexual health and male reproductive health for women was officially recognized by the International Conference on Social Development. Thus increasing male involvement may improve maternal health and reduce maternal morbidity and mortality [9]. A systematic review of the impact of male involvement on the maternal health outcomes of women in developing countries has provided three broad categories of male involvement:

- Active participation in Mother care services similar as support of the partner by the hubby during gestation, parturition or postpartum.
- Fiscal support handed for gestation related and parturition charges.
- Shared decision making powers with woman on Mother Health issues [10].

Reasons for Mate Support during Pregnancy

Gestation is known to be associated with major emotional changes. Studies have revealed the presence of different emotional patterns in pregnant women, who frequently present non-clinical symptoms of depression and/or depression. This response is most violent during the first and third diggings, and gradationally in the alternate quarter [11].

Although these changes are common, they make unborn maters more vulnerable to major depressive complaint [12]. Also, these goods are nearly affiliated, in the sense that stress may contribute to the perception of stress diseases [13]. Thus, depression and stress should be assessed inclusively within a single emotional health model for pregnant women. It's veritably important to understand the goods of this emotional pattern, not only on the interests of the expectant mother, but also because stress and depression may be suitable to prognosticate the anthropometric parameters of the baby at birth [14,15].

To date, numerous studies on emotional health during gestation have concentrated on the mother. Indeed, there's still some contestation over the addition of the father in similar studies, despite the significance of the mate in the relationship. According to several studies that included fathers in their analysis, it's clear that both actors endured depression and stress during gestation, although the frequency and emergence of these problems at this time remains an open question. Indeed, numerous men believe that inadequate account is taken for their emotional health during gestation and that support and coffers should be handed for this [16].

An important role of maternal support during maternal and maternal health, especially postpartum mental health ensures that health policy makers should prioritize maternal emotional support during pregnancy. This can be done by holding educational classes for pregnant parents, which can lead to significant understanding between couples. Later, the mother would benefit not only from her husband's emotional support but also from her practical help, including child care. Therefore, health care providers are in a unique position to educate communities about the important role of family support in reducing postpartum complications, especially mental disorders.

BARRIERS TO MALE PARTICIPATION DURING ANTENATAL CARE

The reason for the exclusion of men is the belief that reproductive health issues only concern women. In patriarchal societies, male partners often do not accompany their partners in antenatal or postnatal care services and are not expected to be present at the time of the birth of their children [17]. In a study the researchers reported that men who accompanied their partners to clinics were sometimes gossiped about by their male counterparts, and interestingly, by women at clinics who sought maternal care; as a result, this may encourage pregnant women to discourage their partners from sharing in order to avoid embarrassment [18].

- Lack of resources that promote male participation in maternity care.
- Lack of awareness of the role of male partners during childbirth was identified as a major barrier to male participation in maternity care.
- Age of male partner: young couples are more likely to go to maternity care than older men.
- Male partner work schedule: Application barrier may be the result of their type of work as government employees. The duration of the clinic and the length of time they spend at the clinic may be discouraging or disruptive.
- Financial considerations.
- Abuse by health workers.
- Longer waiting times and longer maternity care were major barriers to male participation.
- Lack of knowledge about maternity care services is considered an important barrier to male participation, hence the need for comprehensive education and in depth awareness campaigns [19].
- Cultural Belief: It is a remarkable fact that many Nigerian men are reluctant to participate in the care of their partners during pregnancy and childbirth. This may be a result of traditional beliefs that issues affecting pregnancy and labor are only relevant to women.
- Fear of HIV testing: Some participants are afraid of HIV testing and their partners think it can be a source of misunderstanding between spouses.
- The belief that the presence of a husband will interfere
 with care: Some men thought that pregnant women would
 not be comfortable if health workers cared for them in
 front of their husbands and that health workers would not
 be comfortable providing help in the presence of men.
- Religion.
- Level of education.

CONCEPTUAL FRAMEWORK

The conceptual framework for research was changed from Dec (2013), the conceptual framework for male partner involvement in obstetric care. In this changed model, a man's involvement in the ANC of his partner may be affected by his social characteristics such as age, level of education, occupation and religion. Marital status and whether they are living together may be important factors in determining the degree of involvement. Cultural norms that distinguish gender roles may not encourage men to participate in activities marked as feminine. Other family members such as mothers and mother in laws may be seen as dealing with pregnancy and childbirth and thus men may be reluctant to get involved. Some taboos may forbid male involvement in other aspects of maternal care. Factors within a health facility may or may not encourage male participation in obstetric care. The readiness of health facilities to accept men accompanying their partners, male friendships in services can influence men's involvement.

This model works in research in such a way that, its origins better describe the current study to look at women's perceptions about issues related to men's involvement in the ANC in the Second. Under the guidance of this framework, research will be able to find women's perspectives on major barriers to the ANC. Given the ideology, age, level of education, occupation, and number of children, marital status, cohabitation and religion will be considered social factors that may influence their participation in the ANC. Social and cultural factors considered in the study to influence men's involvement in the ANC's beliefs, social norms, social norms and traditional practices in the ANC.

The ANC related health facility characteristics in the study were staff attitudes, waiting times, provision of men at the antenatal clinic and men admitted to the maternity ward during child-birth. Outcome fluctuations (male involvement in the ANC) are measured in five key variables. Flexibility is associated with partners in the clinic, discussing maternal and partner health issues, providing financial and physical support for partners and planning for emergencies, childbirth and postpartum care (Figure 1).

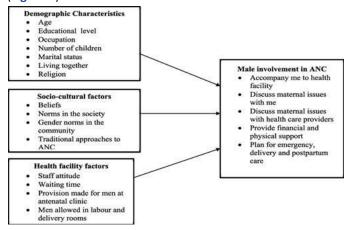


Figure 1: Conceptual framework

FACTORS THAT PROMOTE MALE PAR-TICIPATION IN ANTENATAL CARE

Men's participation in reproductive health issues has been re-

garded as an effective and promising strategy for dealing with reproductive health problems since the 1990's [20]. Men's education and attitudes, knowledge and awareness, social factors, psychological factors, aspects of the health system, and policies play an important role in men's involvement in reproductive health. Plans to effectively use men's involvement in reproductive health programs should address barriers and challenges in men's support services [19].

DISCUSSION

Motivations to Attend Antenatal Care

Satisfaction with maternal care (ANC) in Nigeria may be improved by improving customer responses, quality of clinical care, ensuring access to equipment, improving easy access to medication, and expanding ANC free resources.

In a study conducted in Koghum, Jos South, Plateau State, Nigeria, of those who visited the ANC, 187 (93.9%) attended for reasons related to fetal fitness tests, 8 (4.1%) on health problems, and 3 (1.5%) of general health. Of those who did not attend, 93 (47.0%) reported that they did not go to the ANC because of the distance from their homes [21].

CONCLUSION

In conclusion, men's involvement in antenatal care (ANC) aims to encourage husbands to support women's care and related interventions, including preventing mother to child transition from pregnancy to childbirth, and throughout the postpartum period. Maternal deaths are caused by pregnancy, labor or postpartum complications but their incidence may decrease if there are adequate maternity programs for pregnant women, their partners and relatives.

Men's involvement is important in developing maternal and infant health indicators in Nigeria. Regardless of the positive attitudes of men; Lack of men's health infrastructure and inadequate understanding of community members and health care providers regarding the role of men during pregnancy hampers their mobility. Health promotion is needed to equip men with the necessary skills to play an active role in the activities of the ANC. Future interventions should be discussed among other things; the cultural ability of providers to include men accompanying their spouses in the ANC service industry and to create friendly reproductive health services. Involvement in men in maternal and child health (MCH) is important, so participatory and holistic methods should be used to encourage participation. Community awareness is important in raising awareness of the importance of male participation in MCH.

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