

## Promoting healthy couples' communication to improve reproductive health outcomes

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## Appendix. Evidence-informed interventions to increase healthy couple communication for modern contraceptive uptake

Intervention	Results in: 1) increased modern contraceptive use; 2) couple communication on contraception; 3) gender equality/GBV	Sample size	References
India, two-armed cluster randomized controlled trial			
The intervention involved three gender and family planning counseling sessions delivered by trained male village health care providers to married men for the first two sessions and to couples for the last session. The men only sessions highlighted practicing respectful communication with his wife about FP. The couples session supported joint decision making. The intervention is a good example of a gendersynchronized approach, having men and women meeting separately and then together.	1) Women who received the intervention had 1.58 times the odds of reporting modern contraceptive use compared to women in the control group at 18 months follow up; In another analysis of participation in the sessions, the couples were twice as likely to use contraception at 18 months follow up if they participated in either the men's only sessions or the men's and couple's sessions, compared to those who did not receive the intervention (Raj et al., 2016).  2) Women who received the intervention were 1.77 times more likely to report contraceptive communication at 9 month follow up relative to controls. Those who participated in the intervention and had never previously discussed contraception with their spouse were more likely to initiate those discussions with their spouse than control participants at follow-up, and for those who were already having discussions about contraception with their spouse, those who participated in the intervention were more likely to continue to do so at follow-up, compared to control participants (Raj et al., 2016).  3) Women in intervention were less likely to report interpersonal violence (IPV); men in the intervention were less likely to report attitudes accepting of sexual and physical IPV. Compared to the control group, men who were in the intervention group were significantly more likely to have equitable attitudes about who should make household decisions.	N = 1,081	Raj et al., 2016 <sup>21</sup> ; Fleming et al., 2018 <sup>58</sup>

Intervention	Results in: 1) increased modern contraceptive use; 2) couple communication on contraception; 3) gender equality/GBV	Sample size	References
Malawi, randomized pre-post plu	ıs IDIs		
The intervention relied on a male outreach worker to target husbands with FP information, counseling, and where to obtain methods based on the information-motivation-behavioral skills model, an empirically validated model of health behavior. Male outreach workers also facilitated appointments to obtain FP and/or arranged home visits to obtain FP. Men found financial arguments for FP more persuasive. Topics also included addressing gender norms related to FP, challenging the norms that a large family is a sign of virility.	<ol> <li>At follow-up, the intervention group was significantly more likely to use contraception. 78% of participants in the intervention group reported using contraception compared to 59% in the control group.</li> <li>Both the quantitative and qualitative analyses indicated that couple's communication was an important factor for the uptake of family planning methods.</li> <li>In the qualitative analysis, data showed that there may be a small shift towards more equitable decision-making about family planning, but men still typically have the final say. The qualitative analysis also showed that about half of women were used contraception in secret before the project began.</li> </ol>	N = 400 men	Shattuck et al., 2011 <sup>5</sup> ; Hartmann et al., 2012 <sup>40</sup>
Kenya, baseline and endline surve	eys plus IDIs		
The intervention used community level FP dialogues about gender, sexuality and FP to address FP misconceptions, normalize FP discussions and increase FP acceptability. Public examples of couples making joint FP decisions legitimized couple communication and decision-making concerning FP. CARE trained 150 community-based facilitators.	<ol> <li>At baseline 34% of women and 27.9% of men used modern FP methods; at endline, 51.2% of women and 52.2% of men used modern FP methods. Women who were exposed to the dialogues had 1.78 times the odds of using a modern FP compared to unexposed women at endline.</li> <li>Women who reported more spousal communication were significantly more likely to use a modern FP method.</li> <li>Men who reported high approval of FP were more likely to report use of a modern FP method when they also had more gender equitable beliefs. Women described shifts towards more equitable household roles. Although household roles related to housework and decision-making remained largely the same, some couples described changes in decision-making around household budgets, purchases, and assets.</li> </ol>	N = 1,267 women; 622 men plus IDIs with 10 couples	Wegs et al., 2016 <sup>41</sup>

2 April 2022

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El Salvador, pre-post survey, quas	i-experimental		
A family planning counseling program was integrated into a water and sanitation project in 13 villages. After they received community approval of the project, they trained volunteers to incoporate FP planning information into the educational activities for the water and sanitation project. The information included messages about gender equality. There were also two home visits.	1) Among men, there was a significant increase in contraceptive use from 44% to 63%. The respondents were 1.68 times more likely to report using contraception at endline.  2) Both women and men reported significantly more discussions in the prior 6 months on the number of children, using an FP method, which FP method to use, men's roles in FP, and the cycle of women's fertility.  3) The percentage of men and women who reported discussing men's role in family planning increased from 5% to 23% and 7% to 16%, respectively. Women who participated in the project were significantly more aware of their cycle of fertility, increasing their bodily awareness.	N= 92 women who were not program participants; N= 97 women who were program participants; N= 95 men who were not program participants; N= 80 men who were program participants;	Lundgren et al., 2005 <sup>38</sup>
Senegal, pre-post cross-sectional	surveys based on exposure to program intervention	•	
The intervention (Senegal Urban Reproductive Health Initiative (SURI) was a multicomponent intervention with religious leaders speaking favorably about FP and couple communication on FP, FP messages on TV and radio and house to house outreach plus community drama activities highlighting couple communication. This was complemented with improving the quality and quantity of contraceptive services by trained providers and reduction of stockouts.	1) While increase in uptake of modern contraceptive use was not significant, the reported method use did change significantly towards a larger share of men reporting use of long-acting methods, such as implants and injectables, compared to baseline, with a decline in less effective methods such as male condoms and pills. Men who were exposed to FP messages on TV, by religious leaders and community activities were more likely to be using a modern method than men who were not exposed to these activities.  2) These SBC interventions were also associated with men's FP use and significantly associated with spousal discussion.	N = 1,811 men	Speizer et al., 2018 <sup>63</sup>

April 2022 3

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Nigeria, cross-sectional analysis o	f baseline data from the larger MTV Shuga evaluati	on	
The study examined exposure to family planning messages and advertisements seen on television in the last 6 months.	1 & 2) The respondents who indicated they had been exposed to family planning ads on TV were 2.5 times more likely to discuss family planning with their partner. Those who discussed family planning with a partner were 2.7 times more likely to report using a modern method. On its own, seeing advertisements on TV was not significantly associated with using a modern method.  Communication about family planning with a partner was an important mediator of the effect of family planning ads on use of a modern method.	N = 777	Do et al., 2020 <sup>36</sup>
Bangladesh, pre-post quasi-exper	imental design		
The intervention consisted of training of field workers to improve their communication and counseling skills and established peer group discussions led by the trained field workers. The intervention also measured attitudes that practicing FP improves spousal relationships. The control groups were women visited at home by a field worker.	<ol> <li>In the intervention group, modern contraceptive use increased from 58.9% at baseline to 62.6% at endline, compared to minimal or negative changes in the control groups.</li> <li>By follow-up in 1996, there was a statistically significant increase in the intervention group concerning whether the women had discussed FP with their husband. Those women who discussed FP with their husbands were 8.28 times more likely to use modern methods of contraception. Among the 82% of women who said that they talked to their husband in 1996, 43.1% reported using a modern contraceptive compared to only 8.4% for women who did not talk to their husband.</li> </ol>	N= 860 married women. Twelve villages were in the intervention group; 12 villages in the control.	Kincaid, 2000 <sup>64</sup>
India, quasi-experimental			
The intervention consisted of community mobilization, advocacy, and capacity building of providers. The multi-level intervention strengthened knowledge of young married women, improved inter-spousal communication, and advocated with influential community levels to facilitate conversations on reproductive health plus training providers to deliver quality care.	<ol> <li>After 18 months, the intervention group had a 27% increase in utilizing contraception compared to 5% among controls.</li> <li>After 18 months, 43% of women in the intervention group reported significantly improved couple communication on FP compared to 13% in the control group. Women who had communicated about contraceptive use with their husbands were 9.53 times more likely to use contraception than those who did not communicate with their husbands on FP.</li> <li>Young married women in the intervention area reported increased individual autonomy to choose and use FP methods without permission from their families.</li> </ol>	N = 1,680	Behera et al., 2016 <sup>65</sup>

April 2022

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Nepal, pre-post surveys			
The intervention consisted of an entertainment education radio serial, supplemented with radio spots, training and print materials for both couples of reproductive age and providers. Spousal communication was a major theme of the serial with role models oof a responsible husband concerned for his wife's health, listening to his wife's concerns and values her opinions.	1) By endline (1999), those who reported join decision-making by wife and husband had the highest level of contraceptive use (66%) compared to couples in which the wife made FP decisions (60%) and those in which the husband made decisions (58%).  2) Exposure to the radio drama was associated with a significant improvement in spousal communication; however, exposure to the program may have built on existing spousal communication, rather than initiating it.	N = 1,442 women	Sharan et al., 2002 <sup>33</sup>
Pakistan, pre-post			
The intervention, called FALAH, consisted of individual counseling for men; men's group meetings at the community level; sermons on FP at mosques by sensitized religious leaders; community drama; and radio/TV messages. Over 1,500 religious scholars were trained. Women were reached by community based volunteers (CBVs). A specific objective of FALAH was to increase interspousal communication on birth spacing, including communication initiated by men and men's responsiveness to communication initiated by women. The intervention was also complemented with enhanced social marketing of FP commodities plus improving the quality of care by providers.	1) From baseline to endline, contraceptive prevalence rate increased from 29.6% to 37.9% and demand for FP increased from 64% to 71%. They also reported a decrease in unmet need from 14.2% to 10.%. For the men's group meeting intervention, the predicted probability of contraceptive use was 59% for participants, compared to only 42% among men who did not attend group meetings.  2) Men who attended talks by religious leaders who supported birth spacing were significantly more likely to report that they would have a positive response to their wives if they brought up the topic of FP (80% of men exposed to the talks would have a positive response, compared to 57% of those unexposed).  3) While FALAH did not directly address gender norms, the project generally increased the ability of women to discuss FP with their husbands and for their husbands to be more receptive to these discussions. For the men's group meetings, television campaign, and radio campaign, there were significant positive differences in husbands' approachability, positive response to their wife discussing the topic of FP, and approval for FP (outcomes from the religious gatherings were more mixed).	N= 2,784 married men at baseline plus 2,649 married men interviewed at endline plus 2,000 randomly selected women; 270 CBVs and 50 health care providers	Ashfaq et al., 2015 <sup>66</sup> ; Mahmood, 2012 <sup>67</sup>

A complete list of references used in the preparation of this appendix can be found at: <a href="https://www.fphighimpactpractices.org/briefs/couple-communication/">https://www.fphighimpactpractices.org/briefs/couple-communication/</a>

April 2022 5