



## Men's preconception health behavior: A qualitative study<sup>☆</sup>



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### KEYWORDS

Preconception health behavior;  
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### Abstract

**Objective:** This study aims to reveal the meaning of preconception health behavior from the men's perspective in Indonesia.

**Method:** We used a phenomenology interpretative approach in this study. We collected the data through in-depth interviews with eleven married men.

**Results:** We found two themes: (1) physical health-related behavior and (2) reproductive health-related behavior.

**Conclusion:** Our study findings offer an understanding of the men's perspective regarding preconception period for the nurses and health care professionals. Therefore, improving the understanding of men's preconception health behavior is of high importance to address their participation in reproductive health.

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## Introduction

The Program Action of the International Conference on Population and Development (ICPD) held in Cairo in 1994 called on the importance of men's participation in reproductive health.<sup>1</sup> Men are expected to participate and take

responsibility as partners in reproductive health and to promote gender equality in reproductive health, beginning in the preconception period.<sup>2</sup> This is aligned with the reproductive health concept by the World Health Organization which posits that reproductive health is a mutual responsibility and should not be upheld solely by women.<sup>3</sup>

Various factors can influence men's participation in reproductive health, including socio-cultural, socio-demographic, knowledge and attitude on reproductive health, and institutional factors.<sup>4</sup> Men's participation is a fundamental part of Mercer's 'Becoming a mother' theory which has been a widely accepted theory in maternity and women's health nursing practice. In this theory, a man's readiness to become a father holds a vital role in the

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maternal role.<sup>5</sup> Another important conceptual framework in nursing practice is the Family-Centered Maternity Care (FCMC) concept that emphasizes the men's participation in its practice. FCMC starting at the preconception period is expected to fill the gap in maternal and infant health care.

Understanding men's roles in reproductive health, particularly in the preconception, are of high importance if we are to increase men's participation in reproductive health. Nevertheless, the perspective, motivation, and participation of the Indonesian men regarding the reproductive health are still poorly understood. However, to our best knowledge, this topic is yet understudied. We, therefore, aimed to shed light on the perspective meaning of the preconception health through the lens of men.

## Methods

### Study design

This study was conducted with the phenomenology interpretive approach to explore the men's experiences throughout the preconception period since they got married. We did in-depth interviews focusing on the life-world experiences of the men in their preconception period.

### Participant

Participants were recruited by using purposive sampling method. The inclusion criteria were being 15–49 years old, being married for the first time, being in good health, being able to communicate his experiences, residing in Yogyakarta, and willing to participate in the study.

### Data collection

Eleven participants living in the working area of Moyudan Public Health Center Yogyakarta Indonesia agreed to

participate in this study. The first author conducted in depth-interviews which lasted for 30–60 min each. Field note was also gathered after each interview. Informed consent was sought from the participants as well as their wives.

### Ethical consideration

The ethical approval was issued by the Ethical Committee of Faculty of Nursing, Universitas Indonesia (No. 58/UN2.F12.D/HKP.02.04/2018). We applied the ethical principles during the study process. These included providing full disclosure about the study participation. In the interviews, words and sentences were carefully composed, and sensitive words were avoided to prevent uncomfortable situation for the participants.

All participant identity and data were secure and could only be accessed by the research team. We used the anonym code to mark the participant's identity. During the interviews, the participants were accompanied by a person voluntarily appointed by the participants. This was done since having a private discussion between men (the participants), and woman (the interview) is regarded as culturally and religiously unacceptable in the context of this study. The participant's wives were also explained about the study and permitted their husband's participation.

### Data analysis

We used thematic analysis approach by van Manen.<sup>6</sup> In this approach, we applied selective or highlighting methods to reveal significant sentences to capture the essential meaning of our research phenomenon.

## Results

### Participant characteristics

The demographic characteristics of all participants in this study are presented in [Table 1](#).

**Table 1** Participant characteristics.

Participants' codes	Demography						
	Age (year)	Latest education	Marriage period	Occupation	Religious affiliation	Willingness for marriage	Number of children
P1	26	High school	1 year	Technician	Islam	Own will	1
P2	28	High school	7 months	Employee	Islam	Own will	0
P3	29	High school	2 years 11 months	Factory worker	Islam	Own will	1
P4	29	High school	3 years	Employee	Islam	Own will	1
P5	25	High school	2 years	Business owner	Islam	Own will	1
P6	25	Bachelor	4 months	Employee	Islam	Own will	0
P7	36	Diploma	4 years	Employee	Islam	Own will	1
P8	25	Bachelor	3 months	Teacher	Islam	Own will	0
P9	29	Bachelor	10 months	Employee	Islam	Arranged	0
P10	29	Bachelor	9 months	Teacher	Islam	Own will	0
P11	29	Master's degree	1 year	Lecturer	Islam	Own will	0

**Table 2** Men's Preconception Health Behavior.

Category	Participants' statements
Physical health-related behavior	<i>"Exercise actually affects our health right? I often work in the other regions, so I get tired afterward, but there were times when I used to make time for a little jogging in the morning, sometimes while doing the morning shift, and I felt good. People said that we would get tired after doing exercise, but I felt otherwise. I used to have a routine exercise since before I got married until I had one child" (P3)</i>
	<i>"...I think I mostly do a daily routine. For exercise, I sometimes think about it but never really make it. Indeed it is recommended to get much exercise, especially after we have children in the family. I have the intention and plan to do it, but it is yet to realize. Maybe I will try to walk routinely... more walking and cycling" (P11)</i>
	<i>"Well, I was often preoccupied with work especially being at the workshop. Sometimes I had to skip lunch until 2 or 3 pm. But after marriage, I have my meal more routinely. I take a break and have my lunch during lunchbreak" (P1)</i>
	<i>"...I guess I have been told that it is indeed healthy to quit smoking, but I am already addicted to it since a long time ago. If I did not smoke, I would feel weak, dizzy, and alike. But after getting married and actually before getting married, too, I started to reduce smoking." (P4)</i>
	<i>"Then I should arrange my sleep time, perhaps at around 9 or 10 pm I go to sleep to get up at dawn at the latest..." (P8)</i>
Reproductive health-related behavior	<i>"I do not smoke; while some other friends quit smoking before getting married. So I am quite healthy even though I had no special preparation to be fit for marriage" (P10)</i>
	<i>"I personally know how to take care of my reproductive organ. But all I know is coming from sunnah (Prophet Muhammad's traditions in Islam) to take care of the reproductive organ for example regularly trimming the pubic hair, so at that time we can also check if there is any problem in it (laugh)" (P11)</i>
	<i>"Well, I found the information on the books (marriage preparation book) and the internet is pretty comprehensive. I have read through some materials on how to prepare for marriage for men and women. And since I am a man, so I prioritized in reading the preparation for men, what to take care and what to earn. Well yeah, we do need to take care of... excuse me, our reproductive organ and also the way we do sexual intercourse. The step-by-step of sexual intercourse, for example, the foreplay, recommended positions, what to do to achieve maximum sexual intercourse. With regard to women's reproduction I learned about the menstruation cycle." (P8)</i>
	<i>"Well, I did not come to realize (about reproduction health). I did not. The most important thing is being healthy and trust the Almighty, that's it." (P7)</i>

## Thematic analysis results

Two themes emerged from our thematic analysis: (1) physically health-related behavior and (2) reproductive health-related behavior. This theme is presented in [Table 2](#).

## Discussion

Physical preparation in this study stated in theme "physical health-related behavior" practiced by a participant in various activities such as regular exercise and physical activity, arrange diet pattern, avoid tobacco consumption and organize sleep pattern. These activities in line with men's

preconception health behavior regarding their knowledge and attitude to address preconception wellness.<sup>7</sup>

The regular exercise known a positive impact on health, it affects both on mind and body regulation. Exercise became one of an important elements in health promotion during pre-conception period.<sup>8</sup> By the regular exercise, weight become decrease, and chronically illness risk development become lower. Exercise not only impact in the physical aspect, but also in stress reduction that leads to mental health and health in the whole. Other activities such as physical activities chosen by the participant to keeping their body healthy. Physical activities range from jogging and cycling practiced due to their intention to keep their body fit before marriage. The physical activities align with the effort to weight control and prevent obesity.<sup>9</sup>

Other activities that related to weight control is managing the diet pattern. Participant in this study adjusted their eating pattern and food preference such as vegetable, fruits, and much water consumption. Seven participants in this study are a smoker. All of them reduce and quit tobacco consumption to prepare their marriage. Tobacco is known related to reducing the capability in reproduction and general health. It affects in concentration, morphology, and motility of the sperm. In other condition, all participant sleep at midnight, and they aware by organized their sleep pattern near the marriage as preparation and reduce the stress. The short duration of sleep can effect in capability to reproduction in men.<sup>10</sup>

Reproductive health-related behavior found in this study. Activities such as keep the male reproduction clean by trimming pubic hair and self-examination are one of the efforts that practiced by men in the preconception period. It is an important aspect of health promotion in men and supports their reproduction health.<sup>11</sup> Active participation of men in their reproduction as a form of reproductive responsibility for men and their couple in the future.<sup>12</sup>

In this study, we found two participants did not prepare their physical condition in the preconception period. This condition same as found in Swedish married men study on their knowledge, attitude, and behavior related to preconception health. Most of them did not prepare and adjusted their life style before marriage. This phenomenon can be ignored cause the men participation in the preconception period still a new concept in many countries such as in European countries.<sup>13</sup> In the other hand, it gives strong implication to increase the mass opinion in Indonesia regarding the active participation of men in preconception.

The men's point of view regarding their gender roles may facilitate themselves in actuating their roles and responsibility in the family. Their perception can also support their readiness in the preconception period. The Family-Centered Maternity Care (FCMC) is a conceptual approach focusing on the family intervention and requiring the active participation of the husband since the preconception period. Embedded in this concept is the Family Centered Preconception Care which include: (1) attitudes and practices of the women and their partners with respect to pregnancy; (2) encouraging women and men to prepare actively for pregnancy; (3) focusing on environment that influences the family, including social, psychological, spiritual, and physical environment; (4) respecting the diversity of the people's lives; (5) engaging the informed decision-making to help women and their partner understand the health issues that may affect conception and pregnancy; (6) empowering men and women to be as healthy as possible before the conception and helping them recognize the actual and potential health problems.<sup>14</sup>

The marriage preparation as elicited by the participants in our study is also linked to the roles of the father. Mercer's theory of Becoming a mother posits the interaction between the mother, baby, and father as the core of the interaction in the family, the smallest interaction unit. According to this theory, men hold a significant role in achieving the fatherhood role, supporting the motherhood role, and also in interacting with the baby.

They are preparing to become a father before marriage is essential. The preconception period allows men to involve

more actively in becoming a father. From the ethical point of view, the father's responsibility should start before conception by adopting a healthy behavior and lifestyle. This is related with the moral responsibility of the prospective fathers i.e.: (1) there are strong evidence that the risk factors in the prospective fathers may affect the future children; (2) the modifiability of the risk factors; (3) the attempts needed to eliminate or modify the risk factors; (4) the severity of harm; and (5) harm that may occur in the future children which can be prevented by modifying the risk factors.<sup>15</sup>

## Conclusions

Our study found that men's preconception health behavior range from physical health-related behavior and reproduction health behavior. This reflects their knowledge about managing self as well as their reproductive health. Our study findings can inform nurses providing preconception care to increase the men's participation in reproductive health. Nurse, especially maternity nurse working in the primary health care settings, should provide assistance and counseling for the partners before marriage as a part of the preconception care. Nurses should be sensitive with the men and their partners while delivering service to better assist them in making decisions and taking actions with regard to the preconception behavior prior to marriage.

## Conflict of interest

Authors declared no conflict of interest in this study.

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