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## Review Article

# Male contraception through womens eyes: trust, perceptions and challenges

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## ABSTRACT

Contraception has historically been considered a female responsibility, with most contraceptive methods designed for and marketed toward women. There is imbalance in contraceptive responsibility between men and women. Historically, contraception has largely been seen as a woman's responsibility, with a wide range of options available to them, while men have had only limited choices. This has led to a disproportionate burden on women to prevent unintended pregnancies. Traditional male contraceptive methods, such as condoms and vasectomy, either require consistent use or involve permanent sterilization, leaving men with fewer alternatives. However, advancements in reproductive health are paving the way for new male contraceptive options, including hormonal treatments, reversible vasectomy techniques and non-hormonal methods like sperm-blocking gels. The introduction of these alternatives presents an opportunity to distribute contraceptive responsibility more equally between genders. Women's perceptions of male contraception play a crucial role in determining its success, as trust, reliability and shared responsibility are central concerns. Many women welcome these new options, seeing them as a way to ease their own contraceptive burden, but concerns over adherence, side effects and effectiveness remain. Society and healthcare providers have a significant role to play in ensuring male contraceptives are widely accepted, properly understood and integrated into reproductive healthcare frameworks. Shifting cultural norms and increasing education on male contraception can help normalize the idea that birth control is not solely a woman's duty but a shared responsibility between partners. With ongoing research and growing awareness, male contraceptives have the potential to transform the picture of reproductive health, making contraception a more balanced aspect of family planning. As acceptance increases and reliable options become available, the responsibility of preventing unintended pregnancies will no longer rest disproportionately on women, but instead be a mutual commitment between partners, fostering greater equality and cooperation in reproductive decision-making. This article explores historical perspectives, current male contraceptive methods, emerging alternatives, women's attitudes toward these options, factors influencing trust and the role of society and healthcare providers.

**Keywords:** Contraception, Family planning, Male contraception, Woman's perception

## INTRODUCTION

Family planning and contraception have long been central to reproductive health discussions. While women have access to a basket full of contraceptive options including birth control pills, intrauterine devices (IUDs) and implants men have been limited to condoms and

vasectomy. This disparity places a significant burden on women to prevent unintended pregnancies.

With ongoing research into male contraceptives, understanding how women perceive these options is crucial. Women's trust in male contraception, their willingness to rely on it and their perspectives on shared

contraceptive responsibility all influence the feasibility of these methods.

### Historical context of contraceptive responsibility

Since the advent of modern contraception, particularly the female birth control pill in the 1960s, the societal norm has been that contraception is primarily a woman's responsibility.<sup>1</sup> Men, in contrast, have had limited options, which has contributed to the perception that they are passive participants in birth control.<sup>2</sup> Studies indicate that traditional gender roles play a significant role in shaping attitudes toward contraception.<sup>3</sup> Many women assume responsibility for preventing pregnancy, fearing potential unreliability or lack of commitment from their male partners.<sup>4</sup> This dynamic persists despite efforts to develop alternative male contraceptive options.

### Current male contraceptive methods

Presently, men have access to only two widely accepted contraceptive methods.

#### Condoms

A non-hormonal barrier method that prevents sperm from reaching the egg. While effective, condoms have a failure rate of around 14% with typical use.<sup>5</sup>

#### Vasectomy

A surgical and generally permanent method that involves cutting or sealing the vas deferens. Although highly

effective, reversibility is not guaranteed, making it a less flexible option.<sup>6</sup> The limited choices available to men reinforce the notion that women should take the lead in contraception. However, new developments in male birth control methods pose to challenge this paradigm.

### EMERGING MALE CONTRACEPTIVE METHODS

Scientific advancements have introduced several potential male contraceptive options, including.

#### Hormonal methods

These include testosterone and progestin-based contraceptives that suppress sperm production.<sup>7</sup> Some examples are Nestorone (transdermal gel), Dimethandrolone undecanoate (DMAU), an oral male hormonal contraceptive, 11 $\beta$ -methyl-19-nortestosterone dodecylcarbonate (11 $\beta$ MNTDC), an oral male hormonal contraceptive. Clinical trials indicate promising results, but concerns about side effects (such as mood changes and decreased libido) have hindered progress.

#### Non-Hormonal methods

These include approaches like the reversible inhibition of sperm under guidance (RISUG), a polymer gel injected into the vas deferens to block sperm transport.<sup>8</sup> Another non hormonal agent is Gossypol, but has side effects like hypokalemia and periodic paralysis. Triptolide, Adjudin, H2 Gamendazole, Eppin, Retinoic acid receptor antagonists, CatSper and Gendarussa are other novel non hormonal contraceptive methods for males.

**Table 1: Women's perception towards male contraception.**

Study (Author, Year)	Location/population	Method/type of study	Women's perspective on male contraception	Key findings related to women's trust/acceptance
<b>Glasier et al, 2000</b>	1894 women attending family planning clinics in Scotland (450), China (900) and South Africa (544).	Cross-sectional survey	Direct focus on women's trust in male pill	a majority of women agree that males have a responsibility to share contraceptive decisions with them.
<b>Heinemann et al, 2005</b>	4 Continents (Europe, Asia, South America, Australia)	Multinational survey	Included female responses on male contraception	High female acceptance if male methods are effective; cultural differences observed
<b>Nkonde et al, 2023</b>	Zambia	Mixed-method (survey+interviews)	Assesses male partner's influence on women's FP choices	Women's contraceptive choices often limited by male partner disapproval; need for inclusive counselling
<b>Parija et al, 2022</b>	Rural India	Cross-sectional community-based study	Focus on male involvement, indirectly reflects women's views	Women were more likely to use FP methods when husbands were supportive; lack of male engagement reduced usage

## ***Thermal methods***

Heating the testes through specialized underwear or ultrasound exposure can temporarily reduce sperm production.<sup>9</sup> The introduction of these options could significantly change the landscape of contraception. However, their adoption depends heavily on societal acceptance, particularly from women.

## ***Women's perceptions of male contraception***

A study by Heinemann et al, found that many women were open to the idea of male contraception but expressed concerns about their partners' willingness to use it consistently.<sup>10</sup> About 30% couples rely on the male contraceptive methods.<sup>11</sup> Key concerns among women include.

### ***Efficacy***

Women need assurance that male contraceptives are as reliable as female methods.

### ***Trust in adherence***

Some women fear that male partners may not take responsibility for contraception as diligently as they do.<sup>12</sup>

### ***Side Effects***

The acceptability of male contraception depends on its side effect profile, with many women expressing concerns about mood changes or long-term health implications.<sup>13</sup> Despite these concerns, many women support the idea of shared contraceptive responsibility and view male contraception as a positive step toward gender equality in reproductive health.

## ***Factors influencing women's trust in male contraception***

Several factors impact women's confidence in male contraceptive methods.

### ***Relationship dynamics***

Trust in a partner plays a significant role in whether a woman would rely on male contraception. Trust depends on various factors like age difference between the male and female factor, duration of marriage and also the number of members in the family. Studies suggest that women in long-term relationships are more likely to support their partners using male contraceptives.<sup>14</sup>

### ***Perceived male responsibility***

In cultures where reproductive responsibility is seen as a shared duty, acceptance of male contraception is higher.<sup>15</sup> This is more common in literate families.

## ***Medical community endorsement***

Women are more likely to trust male contraceptives if healthcare professionals strongly endorse their safety and effectiveness.

## ***Media representation***

Positive portrayals of male contraception in media and public health campaigns can influence women's perceptions and acceptance.<sup>16</sup>

## **SOCIETAL AND CULTURAL CONSIDERATIONS**

Cultural norms significantly impact contraceptive decision-making. In some societies, male contraception may be met with resistance due to traditional beliefs about masculinity and fertility control.<sup>17</sup> Conversely, in progressive societies where gender roles are more fluid, male contraception may be more widely accepted.

Educational campaigns promoting male contraception as a shared responsibility can help shift perceptions. Encouraging open conversations between partners about family planning can also enhance acceptance.

## **THE ROLE OF HEALTHCARE PROVIDERS**

Healthcare professionals play a crucial role in shaping public perceptions of contraception. Studies indicate that women are more likely to trust male contraception if recommended by a doctor or reproductive health expert. About 78.4% of the women in one survey felt insufficiently informed about male contraception.<sup>18</sup> Providing clear information about efficacy, reversibility and safety can increase confidence in these methods.

## **CONCLUSION**

Women's perceptions of male contraception are shaped by historical gender roles, trust in partners, cultural influences and medical endorsements. While many women support the development of male contraceptives, concerns about reliability and adherence remain. Addressing these concerns through education, clinical research and societal dialogue can facilitate greater acceptance and equitable contraceptive responsibility between genders.

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