

On male engagement in family planning

Globally, the failure in effective family planning after birth for women results in 141 million unintended pregnancies, 29 million unsafe abortions, and 150,000 maternal deaths annually! It is predicted that spacing out births for two or more years could prevent over 30 percent of maternal deaths and 10 percent of child mortality.

Refugee women face additional challenges in family planning uptake due to language and cultural differences, lack of social support, pressures to replace lost children, and aid distributed based on household size.

Additionally, like many other African contexts, African refugee couple members exhibit different readiness and desires, with women generally having higher knowledge and readiness and men with more decision-making power. A team of researchers from the University of Michigan (UM) and Bishop Stuart University (BSU) has been exploring the key role of men in family planning and how to engage couples together in family planning decisions and behaviours.

While adopting the Uthando

vention will be a game-changer in addressing the negative statistics that arise from initiatives that only address women and in the absence of men.

The preliminary findings of qualitative research UM and BSU teams conducted with Nakivale refugee stakeholders have pointed to the critical importance of men being engaged in decisions and behaviours that concern postpartum family planning, including the demystifying various inaccurate myths around various methods of family planning, spacing of children, and the determinants of babies' weights, so that African refugees can discuss and decide together as couples.

It was noted that engaging men in family planning decisions may be best if conducted as groups of couples so that overall gender norms and peer pressure work for couples to discuss, decide, and act together, with additional times for individual couples to practice and debrief privately as well.

The biggest challenge to male engagement in postpartum family planning efforts in Nakivale refugee camp is the dwindling financial assistance to refugees, following the withdrawal of funding and drastic cuts by donor agencies like the USAID, WFP, UNICEF, etc. Hence, Urukundo Rwacu will be paired with village savings groups for pregnant couples to collectively save, with the intervention contributing to the savings when both members of the couples attend sessions together. Thus "When couples save together, they feel they are building their home together. It motivates them to support each other and to stay committed," as one of the research participants stated.

Despite the overall enthusiasm around Urukundo Rwacu, research participants also expressed concerns around dwindling supplies as well as overburdened healthcare services.

The lack of tools to work with also compounds the problem.

While some local efforts are being made to address the plight of refugees, such as the recent consignment of food and clothing delivered to Nakivale refugee camp by the Provincial Church of Uganda and Ankole Diocesan teams, there is a massive need for interventions at a global level.

In fact, 50,000 refugees arrived from DRC Congo since the beginning of 2025, but there was a \$307 million reduction in USAID funds for humanitarian programmes and aid in Uganda.

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Lwethu, a couples' counselling model that has shown great success in engaging couples for HIV testing and counselling, the UM and BSU research team developed Urukundo Rwacu, meaning "Our love" in Kinyabwisha, which is a group-based couples counselling intervention to transform gender norms, promote reproductive health knowledge, and enhance couples' relationships and communication skills to ultimately help couples navigate challenging conversations and decisions around family planning. We believe the inter-