

# MEN AND CONTRACEPTION: A STUDY ON MIDDLE-CLASS BRAZILIAN MEN<sup>1</sup>

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## Abstract

The aim of this article is to know and understand men's attitudes and behaviors in regard to contraception. The study is based on interviews carried out in 1997 with middle-class men living in the city of São Paulo, Brazil, and belonging to two different generations. The men of the older generation were born between 1937 and 1957, and those in the younger group, between 1958 and 1972. The life histories of the respondents were marked by the important social and economic changes that have occurred in Brazil in the last 50 years.

The analysis seeks to understand the logic of men's interpretation of their own reproductive life, identifying the components of their arguments, the socio-cultural matrix from which they originate, and their efficacy on the men's social practice of reproduction. The practices related to contraception are the central object of the analysis, which is based on a perspective that emphasizes men's experiences of gender. The idea that it is the women's responsibility to avoid an unwanted pregnancy determines men's practices of regulating fertility in both generations. The hypothesis that comes up from a reading of the material is that a discourse about bodies constitutes the basis of the men's construction, with implications for their reproductive life and for the control over their fertility.

The older generation maintains traditional practices for regulating fertility, such as abortion and *coitus interruptus*, and little by little has incorporated hormonal pills. The pill had a short life, however, due to women's reactions to its side effects. Although the pill is the ideal method in the opinion of the younger generation, the universality of women's complaints has led the men to try out other methods. Both generations tend finally to converge to a combination of the rhythm method and condoms and/or *coitus interruptus*.

Some recommendations for policies can be drawn up on the basis of the results obtained in this study. First, there is need for educational programs for the men, aimed at topics related to gender. The experience of a social stratum exposed to information and innovative ideas shows how traumatic it can be for them to learn to negotiate contraception. Signs of change in the new generations lead one to believe that the expansion of possibilities for reflection about the dynamics of gender would produce positive effects. Second, priority should be given to campaigns for increasing the use of condoms, focusing on the topic of double protection, since this seems to be a concern for only a minority. Third,

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in view of the importance of health as a criterion for choosing a contraceptive method, the authors suggest studies focusing on why women experiment with the IUD but eventually discontinue its use. Such studies would be aimed at encouraging greater use of this method. Fourth, in view of the generality of the criticisms toward hormonal pills, it is recommended that studies be carried out on the possible differences in women's tolerance to the products available on the Brazilian market, and on the opportunity of refining hormonal alternatives for addressing women's needs.

## Introduction

The theme of reproduction has generally been treated in the context of women's life. The almost exclusive emphasis on women in such studies reflects the naturalized construction of the female gender. The secondary position of the father in this type of construction has ended up defining the major subjects for understanding reproductive dynamics, evidenced in the female nature of the samples used in the great majority of the studies. Focusing on the understanding of the levels and patterns of fertility, research in the area has examined reproductive careers and projects from the point of view of women. (Figueroa Perea, 1966) Nevertheless, some survey-type studies have included questions in order to gather men's opinions and attitudes, based on the assumption that decisions on reproduction emerge from the dynamics of couples, thus involving both the women and their partners.

However, at least in Brazil, approaches to reproduction in the context of men's life are very recent. The last National Demographic and Health Survey of 1996 - part of the international DHS program - included a sample of men chosen independently from the sample of women. This is an indication of a change in the approach taken toward reproduction in studies with a demographic scope.

But it is not only in the context of demographic studies that reproduction is seen as a women's issue. In the context of gender studies, motherhood is often the focus of the analysis. The backdrop for these studies is usually the feminist critique on the naturalness of the maternal sentiment, a conception that is part of the Western socio-cultural matrix. (Chodorow, 1978; Strathern, 1988) The issue of assisted reproduction and its implications has sustained recent discussion in the area of gender studies, bringing the focus back to the topic of motherhood. (Strathern, 1995; Laqueur, 1990) It is also in this regard, however, that a highly instigating debate on paternity has come up, making it possible to approach reproduction from a male point of view. (Laqueur 1992; Ruddick, 1992)

The project "Men, the Unknown... Masculinity and reproduction" - of which the present paper is a part - is intended as a contribution to the expansion of perspectives in the field of reproduction, focusing on men's experiences and points of view on this topic. As an integrated research project, all discussions on which it is based, from the first formulations and construction of the field instruments to the definition of the indicators, were geared toward using an approach that would establish communication between the fields of social sciences and psychoanalysis and seek their possible intersections. This is partially the reason for the considerable weight attributed in this study to the dimension of subjectivity, which is, in fact, approached in different ways by the two disciplines.

Based on in-depth interviews carried out with middle-class men living in the largest Brazilian metropolis - São Paulo - the present article analyzes the way men, at different moments in their life histories, construct their views about reproduction and about their capacity to intervene in it. This paper is therefore aimed at analyzing the socio-cultural contents that model men's attitudes and practices in regard to reproduction. The examination of men's projects and practices related to having or preventing offspring places emphasis on the context in which their decisions were made, exploring the dilemmas they were sometimes involved in when faced with a partner's pregnancy. In this exploration, an attempt

is also made to understand how constructions of gender with which the subjects operate influence their evaluations and choices regarding both the decision to have or not have children and the methods used to avoid conception.

## Data and Methodology

This paper is based on interviews conducted with 40 men from two generations, half between the ages of 25 and 39 at the time of fieldwork, and half between the ages of 40 and 59. Men of the older generation were born between 1937 and 1957, and those in the younger group, between 1958 and 1972. Field research was conducted in the city of São Paulo, Brazil, between June and November 1997. It included a larger sample of 103-recorded in-depth interviews with 50 men and 53 women, selected on the basis of previously defined characteristics. Age and conjugal situation at the time of the interview were used to identify 6 groups of men and women: singles and married<sup>2</sup> aged 18-24; married and separated aged 25-39; and married and separated (or divorced) aged 40-59. Despite all efforts made, no married male between the ages of 18 and 24 could be recruited, and only 3 women in this age bracket were found. Although there is no data available on age at marriage for different social strata in Brazil, the difficulties in selecting young married men and women is compatible with the common opinion regarding the postponement of marriage among middle class men and women in Brazilian urban areas.

Subjects included in the sample were selected by the network technique. First, indications of possible subjects were made by the various members of the research team, provided that none of the former had any kinship ties or close acquaintanceship with any of the latter. Next, respondents themselves were asked to indicate friends or acquaintances that they perceived as similar to themselves. When the network failed to provide additional subjects, new first indications were made, along the same lines. Eligibility criteria were used to check the indications. Respondents had to be university graduates, enrolled in university, or taking training courses for university admission exams. When indicated subjects had not completed their degree (including those preparing for the admission exams), an additional requirement had to be met: either their father or mother should have a university degree. Care was taken to include persons from different districts in the city, to reflect the heterogeneity of the São Paulo middle classes as far as possible. Also, for the younger groups, an effort was made to include some subjects with children and others without.

A word should be said about the criteria used for identifying subjects belonging to the middle classes. The study relied on previous studies on Brazilian the urban middle class, which argue that common values and life styles are important distinctive marks of class membership in very heterogeneous urban settings such as metropolitan cities. (Figueira, 1985; Salém, 1986; Velho, 1987) From this perspective, socio-cultural heterogeneity in contemporary metropolitan areas makes income level or position in the production-consumption system, or their combination, unsatisfactory predictors of preferences and behavior. Under such conditions, relevant distinctive marks have to do with a series of values, precepts, language, and affinities, which together make up a particular *ethos*. This formulation seemed adequate to the purposes of this study, which was aimed at a better understanding of the meanings of reproduction among men who could play leading roles in the process of changing attitudes and behavior in this realm.

Given the above, an easy criterion for selecting eligible subjects was needed. On the basis of the background information on the formation of the urban middle class in Brazil, the study assumed that the possibility of obtaining a university degree functions as a distinctive social and individual factor. The university experience broadens one's exposure to new ideas and life perspectives and allows people to accede to life styles that suppose a capacity for reflection and choice among alternative courses of action.

Interviews were recorded and followed a life-history format, emphasizing some topics of special relevance for the study, specifically men's reproductive careers. Interviewees were asked to comment on relevant situations and experiences, aiming at knowing the elements considered important for the subjects themselves. They were conducted in a flexible way, following the flow of the conversation. The script functioned as a reminder to interviewers of the major themes and issues that were to be touched upon. Subjects were asked to talk about their feelings and evaluations related to each of the important experiences reported. This means that important data for the study were as much the facts of their life histories as the representations, meanings, values, and expectations the subjects held regarding situations faced as their lives unfolded.

Analysis involved reading all the interviews with the purpose of re-constructing the subjects' life histories, identifying the significant facts and situations that marked their experiences, and establishing distinctions among them. A number of questions guided the reading of the interviews, including whether there is a common logic among subjects, what differences there are, and how they can be explained. Subsequent readings were made to check for possible misleading interpretations given to key issues such as the meaning of reproduction for the men, the relationships between men's contraceptive attitudes and behavior and their construction of gender, the circumstances and timing surrounding experiences of abortion, etc. Analysis focus on the way men, at different moments in their life histories, construct their views about reproduction and about their capacity to intervene in it. The basic analytical procedure has been to identify the components of men's arguments, the socio-cultural matrix from which they originate, and their efficacy on men's practice of reproduction and contraception.

## Conceptual Framework

In this section, the overall theoretical conceptions on which the analysis of the material is based will be described briefly. The starting point is the need to bring together the notions of "structure" and "agency" in order to understand men's behavior and points of view in regard to reproduction.

The notion of "structure" refers to the constraints that have arisen from the historical circumstances in which the subjects live or have lived, and with which they have had to deal while constructing their life histories. These circumstances, which are of a material and symbolic nature, map out the field of possibilities presented to individuals as alternatives for choice. The location of the social actors and their families in the social structure - both material and symbolic - indicates the limits and possibilities that they face.

The notion of "agency" refers to the ability of the subjects to identify real possible courses of action in view of the determinations of a structural nature. Under this notion, the subjects live out their historical circumstances as experiences, which suppose the possibility of creative intervention in the reality that surrounds them. The subjects construct their individual and social identities, shape their consciousness and subjectivity, and make their choices on the basis of socially determined experience.

From a more general point of view, this perspective derives from classical formulations in the social sciences. On the one hand, there is Marx, with his perspective that individuals “make history within the conditions given by history”. Taken as a whole, Marxist thinking has very clear positions on the role of the forms of consciousness in the historical process of change, while stressing the power of economics with respect to the possibilities for social transformation. (Marx, 1976 and 1978) On the other hand, Weber, with his theory of meaningful action, this meaning being given by the subject's purposes. Weber's theoretical argument to deal with structural and historical constraints is based on the distinction between the individual meaning of action - given by the subject - and the historical meaning, that is, the results obtained from conflicting meaningful individual actions. (Weber, 1949 and 1978)

This is not the place to go into detail about the variety of contributions that have sought to deal with the articulation between “structure” and “agency”. Contemporary authors, such as Goffman (1959 and 1979), Bourdieu (1972) and Giddens (1984), to mention only a few, have invested much of their talent and intellectual competence in constructing theoretical frameworks aimed at dealing with the fact that individual behavior, at the same time that it reproduces the conditions given by the social structure, is also capable of consciously changing these same conditions. Close contact with this literature at various moments in the intellectual paths of the present authors has left its mark on the way they seek to extract meaning from the material collected in the field.

The adoption of this kind of perspective in studies on reproduction and gender is not original, although it is recent. Books such as that of Susan Greenhalgh and others (Greenhalgh, 1995) have been instrumental in reversing the highly restricted trend in reproduction studies, resulting from an exclusively and excessively technical demography, which is nevertheless extremely weak on theory. The works in that volume exemplify the kind of motivation and approach from which the present study arises. In particular, this study echoes the importance, stressed by Greenhalgh, of revealing the contents of cultural constructions of gender in the analysis of behavior related to having and preventing children.

The notion of gender is therefore central to the adopted analytic perspective. We use it in the way developed by Connell (1987), whose inspiration comes from various preceding or contemporary authors. The idea that gender identities and behaviors are built on social practice is a basic tenet of this notion. That is, differences in gender are not fixed categories. Subjects as social actors actively build them up. From this point of view, the biological differences between individuals have “practical relevance” - to use Connell's expression - for the social uses that are made of them. They are therefore not causal aspects. Seen from this perspective, the bodies that take on this or that gender identity, in any of their variations, are “bodies in use”. That is, they are bodies that, through social practice, have acquired particular meanings. The cultural matrixes in effect in a given society and at a given period of its history are also part of social practice and offer a repertoire of meanings which may or may not be appropriated by the subjects and by the institutions which have originated from these subjects' social practice. (Connell, 1987; Laqueur, 1992) Therefore, in the “reproductive arena” - a notion coined also by Connell (1995) to indicate the reference to reproduction in the constitution and operation of the gender systems - the bodies are presented as reproductive bodies: the woman, who gestates and gives birth and is, for this reason, desirous of being a mother; and the man, capable of fecundating her, and therefore being permanently available and susceptible of becoming involved in sexual relationships.

R. W. Connell's contributions have been of great value in the field of study on men and masculinities. His idea, as well as that of other authors, is that societies always contain various possible actualizations of masculinity. This idea has been usefully employed in numerous investigations in the field. (Connell, 1995; Brod and Kaufman, 1994; Coltrane, 1994; Conway-Long, 1994; Collier, 1995)

The social conditions of class, race, age and generation, among others, provide opportunity for particular constructions of gender. As distinct insertions into the social structure - both material and symbolic - they constitute different experiential contexts and are subject to different constraints and afford different alternatives of action. However, one can identify prevailing styles or standards of being a man, which Connell calls "hegemonic masculinity". This so-called hegemonic masculinity arises from the recognition of the dominance in Western cultural tradition of a socio-cultural matrix of gender responsible for the polarized construction of the male and the female, of a heterosexual and reproductive nature. (Butler, 1990; Strathern, 1988 and 1995) The importance that the literature on gender gives to this socio-cultural matrix is due to its persistent effectiveness in conforming men's and women's experiences in societies flowing from so-called Western culture.

There is no reason to think that things would be different in a metropolitan center on the periphery of capitalism at the end of the 20th century. The study of which this paper is a part chose to investigate the experiences of men in a heterogeneous social stratum, specifically, the "middle classes". The proposed task here is to understand the logic by which individuals interpret their own reproductive life, seeking to identify the elements that make up their argument, the socio-cultural matrix from which they derive, and its efficacy in the subjects' social reproductive practice.

## Background and Respondents' Social and Economic Profile

It is important to be aware of the context of the socialization of middle-class men and women of the largest Brazilian urban center - São Paulo - from which the sample of this study was taken. The subjects were born between 1937 and 1972, and lived through a period of significant social and economic transformations which were responsible for new patterns of behavior and forms of sociability that now permeate their life styles. The city of São Paulo, with its approximately ten million inhabitants, is the second largest city in the world, and the largest financial, technological and cultural center in Brazil. Over the last two decades, employment has grown fastest in the service sector, occupying up to 50.3% of the almost eight million individuals who make up the economically active population, of the total of 17 million persons who live in the São Paulo Metropolitan Region. (SEADE, 1997) Women's participation is numerically significant, equivalent to 41.6% of the labor force of the region. Upper- and middle-class families have access to a broad variety of products and services typical of industrialized societies, despite the great social inequality that pervades São Paulo, as well as all of Brazil.

The older generation of interviewed men, born between 1937 and 1957, were in the 40-59 age bracket at the time of the field work. The representatives of the younger generation were born between 1958 and 1972, thus belonging to the 25-39 age category at the time of the interviews. Both generations reflect in their social paths the different processes by which the new urban middle classes (Wright Mills, 1956) in Brazil took shape. They are technical and white-collar employees of the State or of big companies, liberal professionals, businessmen, and self-employed persons. Their class insertion, that is, the position they occupy in the production system or in the structures of the State, depends largely on the cultural and social resources received from their families or acquired throughout life.

More than any others, the men and women born between 1937 and 1957 benefited from the creation of opportunities for higher education and from the expansion and diversification of employment during a period of great economic growth and of emerging life styles and opportunities for

consumption. In the 1950s Brazil completed the setting up the basic productive structures of modern capitalism, going through a process of consolidating its monopolist phase during the 1960s and later years. Under a military dictatorship, Brazil undertook a process of “conservative modernization”, altering the features of the economy and of society in the country. Expansion of higher education was crucial for meeting the demands of the new profile of production. Education became an instrument of upward social mobility. Schools were positively rated by the ruling classes as a way to recycle their class positions and by the lower sectors as a means of obtaining better positions on the job market.

Projects for social mobility took on the character of family projects, the ingredients of which were not only schooling of the children but also female work and, implicitly, the professional qualification of the women. (Romanelli, 1986; Mello and Novais, 1999) Woman's participation in the labor force grew rapidly, though conditioned by the importance of the conceptions of gender in the definition of women's projects. Nevertheless, the intensification of the process of social transformations in the country also made way for significant changes in the organization of the relations within the family and in the cultural models that govern sexuality.

Profiting from their university degrees, the respondents from the older generation were able to modify their class insertion, some with upward social mobility. Of the 20 respondents, two were sons of urban laborers, four were sons of white-collar workers with limited formal qualification, and two belonged to families which used to run small businesses. In these cases, economic difficulties during childhood were mentioned. The remaining respondents of this generation, however, already belonged either to a *petit bourgeoisie* of solidly established businessmen (three cases), or are the children of traditional liberal professionals (two cases), higher-level public, civil or military personnel (four cases), or local political authorities (two cases). The occupations of the respondents of this mature generation are university professor, journalist, physician, psychologist, advertising agent, architect, geographer, technician in the public sector, manager of a large private company, small businessman in the specialized services sector, and political consultant.

In many cases the insertion or consolidation of class position also involved spatial mobility. Of the 20 respondents in this group, nine were born in the research site, four were born in the interior of the State of São Paulo, three others in states in Southeastern Brazil, and two in the Northeastern Region of the country. Many left home very early and moved to large cities where they could continue their studies. Others moved to São Paulo after graduation due to professional requirements and/or job opportunities.

The respondents of the younger generation - born between 1958 and 1972 - attained and lived through their adolescence in the 1970s and 1980s. Therefore, their entire life unfolded during the period when the social transformations in the country were already quite advanced. The family origin of the respondents of this generation reflected the heterogeneous composition of the middle-class segments of Brazilian society. Six of the 20 respondents in this group are from the wealthy and cultured elite of Southeastern Brazil, including a judge of law, businessmen, financial agents, prominent employees in the banking system, and officers of companies. Five come from socially rising foreign immigrant families of whose parents and grandparents were already involved in business activities in the commercial or industrial sector, or occupied management positions. Two of the respondents belong to typically urban middle-class families whose parents are administrative employees, the mother of one being a elementary-school teacher. Four of the respondents come from the popular sectors of society, their fathers having been manual or routine non-manual workers with low education. For the three other

men, the information provided was insufficient for an evaluation of their social origin. Two, however, said they enjoyed a comfortable living standard during their childhood and adolescence.

The occupations of the respondents of the younger generation include liberal professional, journalist, university professor, market researcher, cultural producer, advertising agent, television director, businessman, corporate board member and manager, tourist agent, educator, owner of a school/athletic gym, and artist. Although no concern for statistical representativity influenced the selection of the respondents, the variety and heterogeneousness of the occupations are obvious, and would have been unthinkable a few decades ago. This is undoubtedly the product of the occupational diversification brought about by the social transformations which have taken place in the country. The majority of the respondents mentioned the importance attributed by their families to education and studies, seen as instruments for future professional recognition. A very few respondents of this generation report depended on great efforts and sacrifices from their parents to complete their education.

The second half of the 1960s and the years following were marked by the counterculture movement. The echoes of the hippie movement, the “sexual revolution”, and the women’s movements, among others, made themselves felt among young people from both the ruling classes and the new Brazilian middle class. Politics and personal relations went hand in hand, especially among the youth with more schooling and in possession of financial resources that would allow them greater cultural autonomy. They defended individual freedom as well as freer interpersonal relationships, including for sexual behavior, despite their ambiguities and contradictions. If the recognition of the equality between the sexes was an assumption of the political ideals of the new generation, the women seem to have been responsible for confronting prejudice, spurred on by the ideal of autonomy, materialized in sexual freedom and professional achievement. Feminism brought also to the fore the theme of women's control over the body and the reproductive function. These questions were reflected in the mass media and in cultural products, joining forces for changes in life styles and behavior. (Romanelli, 1986; Vaitsman, 1994; Almeida and Weis, 1998)

According to information available about practices for regulating fertility in Brazil, the more comfortable and well-to-do urban strata of the population have been making use of various methods at least since the early 20th century. In the following decades this practice extended to the middle classes in formation in the cities. (Souza, 1996; Frias and Oliveira, 1991; Berquó, Oliveira and Camargo, 1977) Before the widespread use of hormonal pills, however, the only alternatives besides abortion were *coitus interruptus*, the condom, and the rhythm method. Although no epidemiological studies are available concerning the practice of abortion<sup>3</sup>, it is common knowledge that this was, and is, a regular practice in Brazil, having long served as a means to limit the number of children in socially respectable families, even though always as a clandestine practice. (Martine, 1996)

It is worth mentioning the differences that have framed the contraceptive possibilities and alternatives for each generation. Many men of the older generation, born between 1937 and 1957, reached the age of 15 before the pill was on the market<sup>4</sup> and at a time when norms of moral conduct, especially in the broad segments of society under the influence of the Roman Catholic Church, greatly reduced the possibilities for sexual contact among young people of the same social class. The accounts of the respondents clearly show the difference between this generation and the one that followed it. The older men frequently mentioned the rigid control they were submitted to by their families, especially in regard to relationships with girls during childhood and adolescence. The first sexual experience with penetration frequently occurred with prostitutes or domestic maids working in their family homes.<sup>5</sup>



Although the memories of such events were often negative, the experiences described refer to the overcoming of barriers of sexual repression to which they were submitted. It is certainly for this reason that many of the respondents married early. Marriage was equated to freedom from repression by the family, especially sexual repression, even though a number of the men had had experiences of intercourse with girlfriends while at college.<sup>6</sup> In fact, this generation led the way in the historic break with traditional moral and family standards in the middle classes. (Ventura, 1988; Vaitsman, 1994)

As already mentioned, the adoption of leftist ideologies and participation in the political mobilization against the authoritarian military regime in Brazil went hand-in-hand with the struggle against family repression. In the discerning words of one of the respondents of the older generation, in his time, “being on the left, getting an abortion, liking Fellini movies and cheering for the Corinthians soccer team were all one same thing!”<sup>7</sup> These subjects were very young men when contraceptive pills were first put on the market, and their use was only gradually disseminated among middle classes and society in general. Therefore, the widespread practice of abortion in the reproductive history of these men should not be a surprise. Abortion, *coitus interruptus* and the rhythm were the alternatives available at that time. This topic will be treated in greater detail below.

The men of the younger generation, born between 1958 and 1972, therefore began their sexual lives with contraceptive pills already available and at a time when sexual and moral customs had undergone major changes. Although socially asymmetric sexual practices persisted, there were more opportunities for sexual contact with girlfriends of the same social level. In fact, the men in the younger generation rarely mentioned having been submitted to the kind of sexual repression described by their older counterparts. Their accounts of the first sexual experience with penetration, even though often practiced with prostitutes, show that they experienced this moment as a rite of passage in terms of masculinity or proof of their male identity, and not as a challenge to sexual repression, as was the case of the older generation.<sup>8</sup> The accounts also show that the practice of sex with girlfriends was considered normal among the members of their generation. Cohabitation without formal marriage was frequent, although neither the partners themselves nor their families expected the same type of commitments associated with a marriage.

To complete this concise description of the cultural environment, which surrounded the younger generation, a process of individualization of personal projects replaced the political agenda. Interpersonal relationships and subjectivity began to take on priority, in part due to the impact of psychoanalysis. (Figueira, 1985; Salém, 1986; Velho, 1986 and 1987) New cultural filters conditioned the way the younger generation tended to face life and its projects. Finding the road already paved by the men before them, the respondents in the younger generation were able to talk about the challenges related to the search for personal achievement and the dilemmas involved in developing their subjectivity.

These changes in customs did not take place without conflicts and asynchrony, as an analysis of the material will demonstrate. It co-existed with enormous social disparities. The transformations described and the emergence of new forms of sociability have left their mark on several successive generations, advancing in some aspects but also running up against deeply ingrained customs and conceptions. Like all change, at the same time that social transformations widen the possibilities for experimentation, they also make room for reversals.

The table below shows the list of male respondents of both generations, indicating the age and marital situation at the time of the interview, the kind of university education, the number of marriages

(either legal or consensual) each had been involved in up to the time of the study, and the number of children still alive at the time of the interview. To safeguard the respondents' identity, the information regarding their respective occupations has been omitted.

**Table 1 – Characteristics of the Men**

| CHARACTERISTICS OF THE MEN |     |                |                         |                 |                 |                        |     |                |                         |                 |                 |
|----------------------------|-----|----------------|-------------------------|-----------------|-----------------|------------------------|-----|----------------|-------------------------|-----------------|-----------------|
| COHORT                     | AGE | MARITAL STATUS | COURSE                  | NO. OF MARRIAGE | NO. OF CHILDREN | COHORT                 | AGE | MARITAL STATUS | COURSE                  | NO. OF MARRIAGE | NO. OF CHILDREN |
| COHORT 1<br>AGES 25-39     | 32  | separated      | Philosophy              | 1               | 1               | COHORT 2<br>AGES 40-59 | 40  | separated      | Journalism              | 1               | 2               |
|                            | 32  | separated      | Advertising             | 1               | 0               |                        | 41  | separated      | Business Administration | 2               | 2               |
|                            | 33  | separated      | Dentistry               | 1               | 0               |                        | 43  | separated      | Psychology              | 2               | 2               |
|                            | 34  | separated      | Law                     | 1               | 0               |                        | 48  | separated      | Engineering             | 2               | 4               |
|                            | 34  | separated      | Marketing               | 1               | 2               |                        | 49  | separated      | Geography               | 1               | 2               |
|                            | 36  | separated      | Educational Sciences    | 1               | 1               |                        | 50  | separated      | Journalism              | 1               | 1               |
|                            | 37  | separated      | Law                     | 1               | 2               |                        | 51  | separated      | Psychology              | 1               | 2               |
|                            | 38  | separated      | Physical Education      | 1               | 0               |                        | 52  | separated      | Electronic Engineering  | 1               | 2               |
|                            | 39  | separated      | Electrical Engineering  | 1               | 2               |                        | 54  | separated      | Social Sciences         | 1               | 1               |
|                            | 39  | separated      | Social Sciences         | 1               | 2               |                        | 59  | separated      | Law                     | 1               | 3               |
|                            | 27  | married        | Accounting Sciences     | 2               | 1               |                        | 40  | married        | Civil Engineering       | 2               | 1               |
|                            | 28  | married        | Physical Education      | 1               | 1               |                        | 42  | married        | Public Relations        | 1               | 2               |
|                            | 29  | married        | Advertising             | 1               | 0               |                        | 42  | married        | Mathematics             | 2               | 2               |
|                            | 30  | married        | Industrial Designing    | 1               | 0               |                        | 45  | married        | Architecture            | 1               | 2               |
|                            | 31  | married        | Economics               | 1               | 1               |                        | 46  | married        | Social Sciences         | 2               | 2               |
|                            | 32  | married        | Industrial Designing    | 1               | 0               |                        | 46  | married        | Geography               | 1               | 2               |
|                            | 33  | married        | Business Administration | 1               | 0               |                        | 48  | married        | Medicine                | 1               | 2               |
|                            | 37  | married        | Advertising             | 1               | 0               |                        | 48  | married        | Chemical Engineering    | 1               | 3               |
|                            | 37  | married        | Engineering             | 2               | 1               |                        | 53  | married        | Advertising             | 1               | 2               |
|                            | 39  | married        | Advertising             | 2               | 2               |                        | 55  | married        | Biochemistry            | 1               | 2               |

## Results: Contraception among Two Generations of Men

The men of both generations have a good deal of information about a variety of contraceptive methods available today. Their opinions often reflect information obtained from the media, from comments and experiences of relatives or close friends and, especially, from their own experiences with girlfriends or other women with whom they have had intimate relationships. The men referred especially to contraceptive methods used with partners with whom they had long-lasting love relationships. The difficulties the women faced when using one or another method led the couples to experiment with alternative possibilities. A number of the respondents, especially of the younger generation, report having accompanied their partners to gynecologists in the search for a solution for their contraceptive needs.

The broad knowledge of contraceptive methods by the men in this social segment is partially related to the high number of their partners who failed to adapt to the pill, thus forcing them to seek out other ways. Although this observation includes both groups of men treated here, it is especially clear in

the experiences of the younger generation, as will be seen farther ahead. As can be seen in the table 2 below, the majority of men had experience with partners using the pill, though its current use is low. Considering the generations of men, the young are currently using either the condom or the hormonal pills, and the older generation has the condom and the rhythm as preferred birth control methods.

**Table 2 – Knowledge and Use of Contraception**

| METHOD                    | OLDER GENERATION |           |            | YOUNGER GENERATION |           |            |
|---------------------------|------------------|-----------|------------|--------------------|-----------|------------|
|                           | Knows            | Has Used  | Current    | Knows              | Has Used  | Current    |
| Hormonal Pill             | 20               | 18        | 1          | 20                 | 18        | 5          |
| Condom                    | 20               | 17        | 6          | 20                 | 18        | 9          |
| Rhythm                    | 19               | 17        | 5          | 19                 | 15        | 1          |
| <i>Coitus Interruptus</i> | 17               | 11        | 2          | 18                 | 10        | -          |
| Diaphragm                 | 16               | 10        | 1          | 17                 | 4         | -          |
| IUD                       | 20               | 14        | 1          | 20                 | 8         | 3          |
| Vasectomy                 | 20               | 5         | 5          | 20                 | 1         | 1          |
| Female Sterilization      | 18               | 6         | 3          | 18                 | 1         | -          |
| Spermicidal               | 13               | 6         | -          | 17                 | 5         | -          |
| Periodical Injections     | 8                | -         | -          | 12                 | -         | -          |
| Female Condom             | 11               | -         | -          | 18                 | 2         | -          |
| No Method                 | -                | -         | 1          | -                  | -         | 2          |
| No Information            | -                | -         | 1          | -                  | -         | 1          |
| <b>TOTAL</b>              | <b>20</b>        | <b>20</b> | <b>26*</b> | <b>20</b>          | <b>20</b> | <b>22*</b> |

\* **Obs.:** 6 men from the 40-59 generation, and 2 from the 25-39 one said they were currently using more than one method.

**Source:** Project “Men, the Unknown... Masculinity and reproduction”

Men evaluate the methods that they know of or have already used on the basis of three aspects: effectiveness, convenience, and effect on sexual pleasure. Barrier methods, namely, condoms and diaphragms, are the lowest-rated by the men since they are seen as inconvenient to use and the ones which most interfere in sexual pleasure. This does not mean, however, that many of the men who complain about the condoms do not use them, as was seen above. The difficulties mentioned regarding the use of condoms are associated especially with feelings of discomfort and the difficulty in putting them in place. The men consider the IUD and the pill as the most convenient and practical possibilities, especially the pill, because of its effectiveness. This opinion is especially strong among the younger respondents.

Among the methods mentioned less frequently are spermicidal - known as substances to be used in conjunction with a condom or a diaphragm - periodic injections, and the female condom. The subcutaneous implants are practically unknown by those interviewed. It is worthy of note that 29 of the men had already heard of the female condom, only recently publicized in the Brazilian media, as part of an initiative by the country’s public-health authorities for an experimental program for controlling HIV/Aids. The men in the older group are less aware of this novelty, whereas 2 of the younger respondents have even tried it, moved by curiosity.

The picture is therefore of a well-informed group of men, having an above average access to information. Middle classes men in a city like São Paulo are aware of most of the contraceptive methods available today, and have also information as to their effectiveness and implications. This level

of information is consistent with the widespread conception in the middle urban strata in Brazil that to have children is a matter of choice. In fact, the planning of offspring is a universal practice in both groups, and a good number of the subjects had children in number, spacing and timing that, if not specifically planned, were nevertheless a result of control procedures.

The analysis that follows is an attempt to situate the knowledge, opinions and practices of men regarding contraception, as expressed in the descriptions of their experiences. The aim was to understand how this knowledge was constructed as the men dealt with situations regarding their love relationships over the years. Consistent with the perspective adopted, the men's experience with contraception will be analyzed on the basis of the socio-cultural matrix of gender within which the respondents have been found to operate.

### **Male and Female**

*“She chose [surgical sterilization] because, in this matter of children, I always thought that the woman should decide whether she wants the child or not. She got pregnant. So, if she wants to have the kid or doesn't want to have it, I think it's her body, so she has to decide. She has priority over my desire, and that's always how we did it (...)” (046, male, age 55, married, 2 children)*

For the majority of the respondents, avoiding unwanted pregnancies is a problem for the woman to resolve. Their opinion is based on the assumption that reproduction occurs in the woman's body. This feeling is especially strong and generalized in the older generation. In fact, the men between 40 and 59 frequently stated that they were never worried about avoiding possible pregnancies, and counted on their partners to take the necessary precautions. They mention in their statements that this attitude is part of the culture of their times, a period when contraceptive pills were not yet in general use and when abortions were the most usual resource for regulating fertility. In the younger generation, even though the idea that the women should take care of themselves - since they are the ones who suffer the consequences - is part of the male ideology, some of the respondents said they have always been concerned with avoiding an unwanted pregnancy or with guaranteeing protection against sexually transmitted diseases.

The idea that it is the women's responsibility to take care of contraception stems more from the naturalized conceptions of reproduction and of women than from the men's concrete experience. There is, in fact, a certain dissonance between this direct experience of contraception and the convinced statements by the men that this is a women's problem. It is true that very few men (and those few were mostly from the younger group) stated that they were always concerned or always careful with prevention since youth. Along the road, however, many of them eventually adopted methods that implied participation by the man, such as condoms, *coitus interruptus* and the rhythm method, often used jointly, as mentioned above. In addition, six of the men of the older generation had opted for vasectomies and five others said they might do so. In the younger generation there was one vasectomized man, while 11 others stated that they would accept getting a vasectomy, but were concerned with the implications of taking a irreversible step. In fact, some mentioned projects for permanent sterilization at the end of their reproductive careers. It is interesting to note the prevalence in both generations of methods that suppose participation by the men, and even negotiation with their partners. Two factors seem to explain men's involvement. On the one hand, the changes in the love relationship along time, and, on the other, difficulties confronted by their partners in taking the pill. In

the context of the contraceptive use dynamics, dissatisfaction with abortion and with side effects attributed to the hormonal pills end up capturing men in the search for alternatives for their own protection and that of their partners.

How is one to explain this dissonance? How can one understand the male construction of contraception? The hypothesis that emerges from a reading of the material is that a discourse about the body is the basis of men's construction, with implications for their reproductive life and for the control of their fertility.

Numerous accounts suggest that, in the socialization of male gender, the woman is seen as a body. This body is the instrument of men's pleasure, object of their desire, and a means for their paternity. The women's body seems to take precedence in many of the situations described in the interviews. For the men in both generations the woman's body is really the principle of all things in reproductive matters. It is the basis of being female. The interviews indicate that, in the notion expressed by the men, the female has one foot in nature, in her biological condition as woman. References to the woman's "biological clock", the importance of her "hormones" or her "hormonal nature" point in this direction. In reality, the idea of woman-nature is a part of the men's socialization from very early on. According to the cultural matrix in which the respondents operate, both women and men are submitted to the power of their bodies. The men separate love and sex. They are seen as more daring or risking more in life, whereas the women tend to associate their experiences of sex and affect - or confuse them, according to some. They are also seen as having more need to feel safe, protected, and so forth.

This kind of conception seems to be more frequent in the repertoire of the older generation, although it is not entirely absent in the younger subjects. Those had more opportunities for learning in close contact with women, and at an earlier age than the older one. In spite of surprising similarities - such as the persistence of sexual initiation with professionals, already mentioned - the younger generation was able to experiment with sex as youth with less embarrassment. As already mentioned, the younger men also had information available from psychology and psychoanalysis, an important ingredient for their worldview. For this reason, it might be that the weight of the naturalized concept of genders has become attenuated in the younger generation's experience. The interviews show men making choices, probably different from those that most of the respondents of the older generation were able to make. They are choices that opened up opportunities for new cultural learning, enabling them to see themselves as different from other men, different because they integrate love and sex in a single experience, because they safeguard the intimacy of their affective relationships with the opposite sex, because they let themselves express sensitivity and emotions. They see themselves as different from what they call the "normal male standard", from a more "macho" style, and this lets them be "more open to their feminine side". There are clear references to the socio-cultural matrix of gender that they have decided to eschew. There seems to be a move towards a more integrated male personal experience; integration taken as cultural choice, within a repertoire where male and female are seen as the result of the biology of their bodies.

The idea of woman-as-nature also has its expression in the male assurance that all women want to be mothers, a desire that apparently has origin in their body. This is the most common of the notions about the genders expressed by the subjects, and statements by many of the respondents could be quoted as evidence of this assertion. Its universality, however, reaffirms the cultural and symbolic importance of the naturalized construction of women and maternity with

which both men and women still labor.<sup>9</sup> Male discourse suggests that the man is often at the mercy of a woman's desire to be a mother. As discussed above, men see this desire as being part of female nature, and it will necessarily show up at some point in the woman's life or in the course of a loving relationship. So the men often transfer to the woman not only the decision to become pregnant or continue a pregnancy, but the choice for surgical sterilization, or even a vasectomy, as well. At other times the men negotiate putting off having children, but they are certain that they will have to back down sooner or later.

In fact, faced with a woman's desire, the man's reaction seems ambiguous. The men recognize and respect this desire as legitimate, sometimes submitting to it, even struggling with their own inclinations or desires. This ambiguity shows up in a variety of contexts, such as in reference to the arrival of a first child or related to the possibility of having a vasectomy as a way to control fertility. Interview material shows that many of the subjects were surprised by an un-planned pregnancy, although at times they were able to put off the arrival of the first child. Even though paternity is part of the expectations for men's life, their projects or desires to have children tend to be located in a chronologically undefined future, conditioning the right moment to a number of personal and professional achievements and to aspects having to do with the marital relationship. (Oliveira et al., 1999; Bilac, Oliveira and Muszkat, 2000) Although a number of the respondents wanted to have children, and others were at times able to insist in not having them, there is a noticeable feeling of helplessness among the men regarding the woman's pregnancies. Sometimes, in spite of the men's subjective desire to terminate a relationship or their ambiguities related to it, they do not feel able to interrupt the process or deny maternity to the woman. They seem helpless to interfere in the women's decision, foreseeing that, regardless of what reaction or interest they may have, the pregnancy would continue and the baby would be born. The men consider themselves as being outside, without control. At this moment, some of the men interviewed clearly do not see themselves as subjects, but as objects of the decision of the other.

Given the above, in practice, the women seem to define the moment when their men will become fathers. It is the woman who tells her partner "I'm going to have a baby". Women plot the script for mature masculinity - which involves having children and becoming a responsible 'family man'. (Bilac, Oliveira and Muszkat, 2000) The men "swallow it down", that is, they accept the *fait accompli* and assume it as if there were no other alternative. That is, faced with the fulfillment of the women's "natural" desire to be mothers, the men tend to give in, to back down. The helplessness that the men feel is rooted in the conception that "every woman wants to be a mother". Female hormones or the biology of their bodies is the basis for this "women's natural vocation".

The topic of vasectomy is another example where the naturalness of the woman's desire to be a mother influences the men's notions. Either spontaneously mentioned as an alternative for avoiding conception or as a reaction to the researcher's questions, all men seemed to have a judgment to make about the matter. It is interesting to note that in both generations there are more men who say they are in favor of this surgical solution than those who say they are against it. However, both those for and against were willing to talk about their considerations and misgivings.

Two of the older and eight of the younger men tend to condition the decision for vasectomy to the end of their reproductive obligations. Their position is understandable, since they are still in the phase of constituting their families or went through separations as relatively young men. Two of the younger group and three of the older group have definite plans for more children. At the same time, they say they plan to have vasectomies possibly at a later date, after fulfilling their family projects. Eight

of the older and six of the younger men state that they want to guarantee their reproductive capacity, fearing that they might regret a drastic move in the future. Half of each group mentioned the possibility that partners in future marriages might want to have children, and think they should be able to satisfy these desires.<sup>10</sup>

The interviews indicate that the respondents know that their reproductive capacity extends longer than that of the women. This awareness seems to be driven by the experience of separation or divorce, either their own or of people close to them, when the perspective of a new marriage brings up the issue of the men's projects for procreation. It should be noted that the references to this type of possibility, seen in both generations, are associated with the trend of divorced men to choose young partners for subsequent marriages. Some of these younger women have not yet had the opportunity of being mothers and, in the men's understanding, they have the right to have children. A reading of the material allows one to risk the hypothesis that the socialization of male gender puts him in the position of being permanently available to the women. The men are to be "inseminators on duty", always able to comply with the women's desire for maternity. The formation of the men in this respect is so strong that one of the respondents had even thought about trying to reverse his vasectomy, so concerned was he with his girlfriend's desire, even though he clearly didn't want any more children himself. In this aspect, masculinity is subordinated to femininity.<sup>11</sup>

Since the men's conviction about the women's body is so strong, the men present a number of reasons to justify the position that contraception is the women's problem. Only very recently have men realized the power that this construction actually gives the women in the dynamics of interpersonal relations. This aspect will be discussed in greater detail below.

### **Abortion in men's experience**

*"(...) I was never really too concerned [about reproduction and pregnancy]. I was never very interested. (...) I was never taught to be concerned with this topic. But I think there's the fact... (...) that women have always worried about it. Because it's the women who take the pill. I think things have been changing recently. (...) In my time we men never had to be concerned about this. And that's the way it was. I have a number of friends who didn't worry about this either and their [wives or girlfriends] didn't take anything and the woman got pregnant and it was the woman who had to go get the abortion. So it was always something for the women and it was really the women who got hurt. Because even the pill is bad for the women's health. But I was never worried about that. I think there was something already in society that the woman would decide. Either they would take the pill or get an abortion." (026, male, age 41, separated, 2 children)*

*"So I had a history during those years with some girlfriends. I got four abortions, two with the same girlfriend. She was my girlfriend for two years. It was very bad. It was pretty heavy, and two [abortions] with two other ones. One of them I didn't even know if I was really the father, but it didn't matter (...) So I think I risked a lot considering the very negative experiences I had. You see, more than once. Getting an abortion more than once is terrible and it's amazing how experience doesn't mean learning, even with a painful experience behind you. Often you still take the risks and this is very hard for me, to realize how I still do this." (040, age 38, separated, without children)*

The passages above summarize the contingencies of contraception from the perspective of the men's experience. The possibility of interrupting an unwanted pregnancy is part of the set of values of both generations. However, the material suggests that there are differences between the generations with respect to the practice of abortion. Changes seem to be related to a more widespread information

and easier access to contraception. The increased sexual freedom and the split between sex and reproduction were not accompanied, at the same pace, by the use of safe preventive methods though. This meant that men and women lived under the risk of being surprised by unwanted or inopportune pregnancies, given the kind of relationship or the stage of life they were in. Faced with an unexpected pregnancy, the choices were to assume it and the child as well, or get an abortion. Many of the respondents mentioned that they precipitated a wedding due to their girlfriend's pregnancy, while others decided to get abortions, repeating again and again the same formula.

Fifteen of the twenty respondents in the older generation reported a total of 33 abortions of children sired by them. Two-thirds of these abortions were performed to interrupt their wives' pregnancies. In contrast, eight of the younger respondents reported 17 abortions, half with their wives. There is no standard available to evaluate how high or how low these numbers are in relative terms, but the interviews show that abortion has been widely used as a means of "contraception", especially by the older generation, where cases of six or more abortions in a single marriage were mentioned.<sup>12</sup>

A good number of the abortions in stable or longer-lasting marriages occurred at the beginning of the relationship or early in their marriage, when the couple's plans definitely excluded raising children. Situations like this are reported by both generations, although the older generation seems to have continued to use abortion as a practice to regulate their fertility, even later on in the marriage. As some respondents stated, to get an abortion was part of the youth culture at the time. It meant independence from the designs of the body and from reproductive norms. In the men's experience, abortion is the preferred solution for an unexpected pregnancy in the context of an incidental love relationship or one that does not involve plans for the future. Nevertheless, some men became fathers under these circumstances, giving in to their partners' wishes, sometimes even against their own desires.

Although the data might suggest familiarity with and even a certain triviality of abortion, especially in the older generation, it is not without ambiguity that the men live through the interruption of a pregnancy of a girlfriend or wife. It should be recalled that an abortion does not necessarily imply for the men a refusal to have children at some later period in life, nor is it a definition as to the future of that specific relationship. However, a number of the respondents describe negative impacts on the relationship with their partners, suspecting in some cases that the abortion contributed to the end of the relationship. However, the experience of abortion is referred to by almost all the subjects who went through one as "traumatic". It is traumatic due to the violence that the interruption of a pregnancy imposes on a woman's body, leaving in its wake the possibility of a new episode in the future, suggesting that the women do not feel comfortable with the practice of abortion, either because of the procedure itself or because they would like to have continued with the pregnancy.

The fact that abortion is an illicit and criminal act in Brazil is an important ingredient in making an abortion a traumatic experience. Even though the respondents probably had access to clinics or specialized professionals, many mentioned the embarrassment caused by the secrecy of the entire process. Concerns about the competence of the professional and the cleanliness of the installations and instruments were frequent. A parenthesis might be opened here. None of the respondents mentioned the product *CYTOTEC* for inducing abortions even though it is widely used in Brazil. (Barbosa and Arilha, 1993; Ramirez, 1999) Although no one was asked about this point, details of their experiences convey that they were talking about conventional abortions, induced by mechanical means or by suction.

The ambiguity of men in regard to abortion was also expressed in their talks about guilt feelings, remorse or relief. Some said that, even many years after the episode, they catch themselves



thinking about what the child whose pregnancy was interrupted would have been like. Even in cases of abortion practiced in the context of short-lived relationships, sometimes extra-marital affairs, the men sometimes confess that they felt relieved when they were informed about the decision taken or after the abortion was over with. They state that they felt very uncomfortable participating in the decision and going with their partners to get the abortion. This discomfort and feeling of relief arise not only from the fact of considering an abortion as violence to the woman's body, but also from the recognition of the legitimacy of the women's desire to experience motherhood.

A word should be said about the role of religion. Some of the men, especially of the younger generation, said that they do not consider abortion a valid option. If, for the older generation, abortion had the connotation of a progressive ideological orientation, the younger men tend to be more conservative in this regard, although they argue that, in their eyes, to interrupt a pregnancy is a matter of choice. The reasons for not assenting to the practice of abortion result from the perception of abortion as violence to a women's body, without making use of any religious type of argument. In the older generation, however, 3 of the respondents mentioned religious aspects. Therefore, the positions of the Catholic Church do have some effect, though limited, on these respondents, confirming other localized studies recently published. (Ramirez, 1999) The opposition to abortion in Brazil seems to be more closely related to the power that the Catholic Church has over "public opinion" than to the importance of Catholicism in popular religiosity. (Rocha, 1996)

If Catholic morals do not have a significant effect on the way the men of both generations position themselves regarding abortion, these men's practice are nevertheless characterized by a clear ethics that admit of no excuse. In a case of decision for an abortion, in any situation, it is the man's responsibility to provide emotional support to the woman, accompany her during the procedure and bear with the costs. The men have to "assume" the situation, regardless of the nature of the relationship. This gentlemanly practice is imperative, denoting good character and responsibility, and is thus cause for positive self-appraisal on the part of the men. In the formulation of this "male ethic", it is as if, by so acting, men compensated their partners for the anguish related to the abortion.

The importance of abortion as a fertility regulation practice for the urban middle classes in Brazil is undoubtedly related to the availability of contraceptive methods and with problems faced in their use. For the older generation, a frequent resort to abortion means a continuity of the usual practice, forged in times before the advent of the hormonal pills. However, the fact is that the pill was only partially incorporated into the life of the middle classes, due to the women's intolerance to its side effects. The relatively limited use of the IUD and the almost complete absence of the diaphragm leave couples with no alternative but the condom, the rhythm method, and *coitus interruptus*. This latter practice apparently encounters less resistance in the older generation. These topics will be discussed at greater length below. The results thus confirm and clarify observations made elsewhere, that abortion is part of the reproductive experience of educated segments of society, despite their adequate information as to methods for prevention. This observation would seem to hold true for the urban middle classes both in Brazil and in other Latin-American countries. (The Alan Guttmacher Institute, 1994; Ramirez, 1999) It is interesting to add that, from the perspective of men's experience, despite the unanimously traumatic character of abortion, men confess that they sometimes take the risk, having sex without protection or trusting excessively on the precision of their calculations in using the rhythm method. Learning in this area seems to be arduous and painful for them.

## **Hormonal Pills and their Problems**

The pill is the men's method par excellence for the younger generation. It was partially thanks to the pill, together with abortion, that the preceding generation was able to separate sex from reproduction. In contrast however, as was already commented, the pill entered the lives of the younger generation at an earlier phase and became part of their affective relationships with the girlfriends and, later, with their wives. Almost all the participants, younger and older (with the exception of two of each generation) had partners who had used the pill.

In terms of contraceptive use dynamics, the pill is a usual practice during the younger men's premarital life or in longer-lasting relationships, as well as among older men after negative experiences with other methods, including abortion. Besides being one of the best known and most experimented methods - along with the condom and the rhythm - the pill is positively evaluated by almost all the men, due to its contraceptive effectiveness. In fact, none of the respondents expressed doubts as to the effectiveness of the pill, although some made reference to the need for women to take it regularly to guarantee contraceptive protection. Besides effectiveness, men consider the pill a practical method – “you just have to take a pill every day and that's it”. In the men's opinion, this practical nature is also associated with a feeling of freedom from worry about undesired pregnancies. For this reason, the respondents tend to be opposed to methods that require a concern with protection every time they have intercourse. Especially problematic are the barrier methods, such as the condom and the diaphragm. Some stated that they often used “condoms at the beginning of their relationships”, and stopped using them when their partners advised them that they were already taking the pill or had begun taking it. Therefore, from the male point of view, the pill is unrivaled among the contraceptive methods available today.

However, there are unfortunately restrictions against using the pill for most women they have been with. In fact, the men complain that, although the pill is fantastic, it doesn't work. They hope for an alternative that will let them remain in the comfortable position of “leaving preventive concerns to women”, but they necessarily have to deal with the women's preferences. Nevertheless, the men not only accept the women's complaints about the hormonal pill side effects as legitimate, but they incorporate their reasoning as their own.

The general experience with the pill as described by men of both generations is of failure. Among the ten men of the older generation married at the time of the interview, 8 mentioned that their partners had taken the pill and found it hard to adapt to, and they eventually abandoned it. All ten separated men mentioned experience with the pill, six among these saying that their partners had discontinued using it due to their intolerance to the side effects. The situation for the younger generation is similar, but less intense. 8 out of the 10 separated young men had had experience with the method, but only three of them mentioned problems with the pill, whereas seven of the ten married men reported tolerance problems for their partners. The data indicates that the method that opened up perspectives of freedom from worrying about the risk of an undesired pregnancy surprisingly finds obstacles to its being the women's favorite alternative in the Brazilian urban middle classes.

In contrast, and often as a result of problems with the pill, many respondents mentioned experiences with the IUD. In the men's opinion, the IUD is the only method comparable to the pill. They consider it practical – as against to the condom - since it does not have to be put in place each time the couple has intercourse, and relatively less damaging to the women's health as compared to the pill.

However, according to the men's evaluation, the IUD is not equivalent to the pill from the standpoint of contraceptive effectiveness. They refer to cases of acquaintances whose wives became pregnant with the method. They also mentioned the risk of hard-to-detect infections and miscarriages in some cases of pregnancy.<sup>13</sup> Although the accounts of those who have partners using the IUD tend to be highly favorable and express satisfaction with the method, especially among the younger men, there are opinions that the IUD is invasive, as it is a foreign object in the women's body and, for this reason, potentially damaging to her health. The interference in the woman's body and the impact on her health are the grounds for the men's assessments on the most common so-called women's methods.

The issue of women's health is especially significant for the younger generation, where one can see a greater concern with issues related to the invasive or aggressive character of the methods in relation to the women's body. It is probably not by chance that this generation has been called the "health generation", because of its concern with care for the body and with keeping in good physical shape by practicing sports and having a healthy life style. Some of the interviews of the younger generation indicated a naturalist-type of conceptions or so-called "alternative" positions, which reject anything that might be seen as not natural. The hormonal pills, especially, but the intrauterine device as well, are subject to this kind of reservation on the part of some of the respondents of this generation.

### **Paths of Men's Involvement: from Rhythm to Vasectomy**

*"(...) [My first daughter] was born because we weren't careful. Even when we went to bed as steady dates I never used a rubber. I would just pull out and (...). So [my daughter] was born [and the wedding was anticipated]. [My wife] started taking the pill but didn't do too well with it, so we started using the rhythm method. This went on for six years, from the time of our [first child], who is now 24, till [the second one], who is 19 now. We did that for six years. We wanted to have [the second child]. He was, let's say, the planned one. (...) Then [my wife] had an IUD put in and it stayed there for two and a half years. When we had the IUD taken out [our second child] was born. She got the IUD taken out on purpose to have a baby. After [he] was born, we continued using the same system, the rhythm method. [My wife] didn't take the pill and I never used a rubber and then [the third one] came along. But she wasn't planned. We were going to stop at two. (...) Then, when [the third one] was conceived... she was born on December 16th, and on December 28th I got a vasectomy. Because we had decided that if the baby were born by Cesarean section [my wife] would be sterilized, but if the baby were born by natural birth, I would get a vasectomy. It was a normal birth so I got a vasectomy and there were the two of us in quarantine!" (087, male, married, age 48, three children)*

This excerpt reveals the dissonance mentioned above between the men's conception that it is the women who take care of contraception, and men's actual participation in this area. The search for alternatives to the pill ends up enabling the men of both generations, but especially the younger men, to become fully informed as to the alternatives available. In addition, the rhythm method is generally combined with *coitus interruptus* or condom, both choices involving the participation of men. Also, the use of the IUD as an alternative to the pill does not rule out the need to resort to condoms or to combining them with the rhythm method or *coitus interruptus*, used during periods when the IUD is being replaced. The statement quoted above (older generation) is similar to those given by the generation that followed it, and make it clear the contraceptive use dynamics.

The men of the older generation, however, very frequently mention that they were not concerned about protection at the beginning of their sexual or conjugal life, and would "breathe easy" when a partner would announce that she was on the pill, as this meant that the responsibility had been transferred to the woman's sphere. A few of the respondents, however, stated that they always worried

about contraception. Once again, this concern was more common among the younger men. Some of them even express the opinion that the solution to the problem of contraception is and should be the responsibility of both partners, a posture that would seem to be consistent with this generation's ideal for conjugality. (Oliveira et al., 1999)

Whether it is because the women gave up on the pill or the IUD or else because the men chose to protect themselves from the undesired consequences of their acts or, jointly with their companions, are looking for the best alternative, the fact is that, despite the complaints, the condom has eventually won out as the most popular method among the respondents of both generations. Used either alone or in conjunction with other methods, the condom appears in the men's discourse as an option, in view of the lack of other options, that is, as the last resort. The majority of the men of both generations, however, described difficulties in adapting to the condom. They complain of discomfort, interruption of the pace of the sexual act, and interference in the pleasure, but they have made efforts to find a way to use them as a normal part of their sex lives. It should be noted that the condom was even mentioned as the preferred method, especially among the separated men, associated with their frequent change of partners. In these cases, the men indicate that they must avoid pregnancies and protect themselves against sexually transmitted diseases, especially HIV/Aids. Some men, however, eventually adapted to the use of the condom and became accustomed to this solution.

In the most extreme positive cases, the use of the condom has an aspect of learning in the sphere of sexuality for some of the men, who have then experimented with non-conventional alternatives for sexual practices. The long interview of one respondent of the younger generation, transcribed below, shows the context in which something that could be called learning in the sphere of sexuality can arise. The attitude he displays is not common among the respondents, as he feels that the condom is his favorite method. He elaborates on the use of condoms in a way that is significant in the context of recent concerns about the spread of HIV.

*"(...) What I mean is, we had a system. She tried to take the pill and it didn't work out. The pill wasn't good for her. She got all swollen. She didn't like it, and she got very emotional. Then I realized she didn't have to take the pill, since we could do it another way. Since she was a very regulated person, we decided to work with the calendar and the condom. So what we did was we would both take care of [prevention]. Except that both of us had to be careful, because sometimes in the heat of things, really wanting to have sex, I risked and she did too (...). So what we did was starting at four days before ovulation until four days after we didn't have any sex, and on other days we had sex without a condom. In these four days before and four days after, we used a condom, but we took some risks. Luckily we never had to go through with an abortion, stuff like that. (...) It was a mutual agreement. We saw that the pill didn't work out so we started using rubbers. But then I wasn't used to the condom and so at the beginning we had an adaptation phase, but adaptation was fast. At the beginning I thought it was awful, but after a while, a few days later, I noticed that it wasn't so bad. (...) The sensitivity is the same and so forth. No problem. I think the security it gave us in not having a pregnancy made the sex better, more relaxed. We had no guilt later. We weren't afraid. And it was cool because we also started to play around and think up things besides copulating, so we did some oral sex and started to play around with a little anal sex and that was pretty fun. Gave us a multiple kind of sexuality (...)"*

*"(...) I think the condom is the best system of all because it entails learning and it entails responsibility. So I think it's a very cool possibility. Especially today with the problem of Aids and sexually transmitted diseases, I think it's the best method. And it makes you pay attention to yourself, take care of yourself, with the other person. I think it has learning beyond preventing conception (...). Another efficient method is the pill. I had some girlfriends who took the pill and didn't have the slightest problem. This [method] is really good because you can relax completely. The person [the female partner] takes care of herself. That means you don't have any trouble at all. The person takes the pill but she has to pay the price because it seems to me like it's not too good to take the pill for the majority of the women. Some seem to take it without problems, but the idea, the impression that I have is that the pill not very good for [women's] health. It's very convenient. From the standpoint of convenience it's fine, but I don't think it's so good for this other aspect of learning affection and of being careful. I think the*

*IUD is an interesting system too, but there is a margin of risk. I have a friend who had (...) [kids] with the IUD (...) so I'd say it would be my third option. And I don't know very much about the diaphragm. I never had a girlfriend who used a diaphragm (...) I know you put it in and then later you take it out. Anyway it sounds like it's a little complicated (...) I think these are the methods I know about, besides the rhythm method, that I think is suicide. [I've used] it. When I was a teenager it was always the rhythm method. But there were always mistakes, always taking risks. It was Russian roulette, madness. With [my former wife] we mixed rhythm with the condom (...)." (040, age 38, separated, without children)*

Like many other respondents in the study, this man mentions a frequent form of using “rubbers”, namely, by combining them with the rhythm method. Considering all the different methods used by the respondents at any time in their lives, besides the pill, this condom-rhythm-method arrangement was perhaps the most frequently mentioned as their main and/or temporary method, especially with fixed partners.

The respondents are aware of the risks involved in associating the rhythm with the condom for preventing conception, and many mentioned that the woman must have a regular menstrual cycle for this system to work. The frequency with which the men have been surprised with unplanned pregnancies suggests that they are correct in this appraisal, and some use this experience to justify their search for safer methods. Indeed, a number of the men attribute pregnancy of a partner to failures in this arrangement. Mistakes in calculation, failures in discipline or irregularity of the woman's menstrual cycle explain the problems. The risk involved in this combination is another reason couples sometimes consider the IUD as a possibility, the inconveniences of the pill being the other.

Protection against sexually transmitted diseases, especially HIV/Aids is an argument that also comes up to justify the choice of the condom. It can be said that men, especially those in the younger generation, are learning to live with Aids and slowly incorporating the need for protection into their relationships. Slowly, because the interviews suggest that the concern with spreading disease seems to be more emphatic among the separated respondents and not very common among the older group. It is true that the script for the interview addressed methods for preventing conception and left the issue of protection against diseases to the respondents. The mentions made do not seem to indicate any special precedence for this kind of concern, at least among the respondents with fixed partners or those who are married. References by respondents to STD's were mostly generic, although four sexually transmitted diseases were spontaneously mentioned (HIV/Aids, HPV, gonorrhea, and herpes). Syphilis has not been recalled. This fact suggests that these diseases are not that important in men's experiences, or that the impact caused by Aids and the campaigns related to it have been so strong that other diseases have been relegated to a back seat.

Concern with Aids already began to compete with concerns about contraception, at least in terms of discourse. Some subjects even mentioned the need for double protection. But practice is subject to impulse and to subjective evaluations of the risk involved, and leaves room for contradiction. Some respondents, therefore, especially those who were separated or recently married, mentioned that they - and their partners - took tests for HIV before setting the condom aside, using it only in fertile periods to prevent pregnancy. The rubber seems to be mandatory in new or sporadic relationships.

However, contraception still seems to be the men's main concern. The accounts about their experiences show that finding a solution for protection that is both effective and suitable to individual preferences is an almost permanent problem. If an unexpected pregnancy or abortions seem to be threats in the life of a couple, the choice of a satisfactory contraceptive method is a challenge. In reality, all the options that the men report having had experience with have aspects that displease them. All

known methods imply restrictions or burdens, either physical or otherwise. For the men and their partners, contraception is a difficult task, and eventually takes on such importance in the men's life that they cannot disguise their uneasiness.

In this context of permanent concern, the alternatives of surgical sterilization become real possibilities for the men interviewed. Nevertheless, both types of sterilization, male or female, are seen as radical and require that the person involved be certain he or she will not regret the decision later on. The theme of regret frequently appears in the respondents' discourse, including in the accounts of situations experienced by them or their partners.

Besides the radical and definitive character of the surgical methods, men refer to female sterilization as very harmful to the body. Although some men, especially in the older generation, have had partners who had opted for surgical sterilization, many of them mention vasectomy as a simpler alternative, although some feel that vasectomy is also a violent procedure for the male body. A few even used strong expressions such as "mutilation" and "castration". The interviews suggest that the phantom of impotence is sometimes associated to this procedure. Some respondents explicitly mention the fear of impotence, regardless of the satisfaction with being vasectomized. The fear of impotence reveals more than lack of technical information about vasectomies. It is, indeed, related to the symbology of the penis in male identity, which has sex as one basic component for the construction of gender, as has been discussed extensively at other points in this paper.

Nevertheless, vasectomies do not seem to run up against strong resistance among the men of either generation studied, notwithstanding a few opinions to the contrary. The choice for a vasectomy is considered suitable for those who have closed their reproductive careers. But they weigh the eventuality of a new marriage with a younger woman and a redefinition of reproductive projects, based on the notion that all women want to be mothers. It can be said that vasectomy constitutes an alternative to female sterilization in the middle classes in São Paulo. For some, vasectomy is the contraceptive method that puts the men's involvement and responsibility to the proof. At the same time, it frees men and their wives from the permanent problem of prevention and enables them to eliminate the fear of an unplanned pregnancy. However, especially for the separated men, the recent HIV/Aids epidemic frustrates their expectations for this freedom, since they see themselves condemned to using a condom anyway, as protection against sexually transmitted diseases.

Although the men are convinced by the idea that reproduction and contraception are women's problems, they are nevertheless becoming progressively more involved in avoiding pregnancies and, more recently, are showing concern regarding the spread of sexually transmitted diseases. Taking the group of respondents as a whole, it can be said that, in view of the vicissitudes of contraception, male involvement in prevention seems to be moving from unconcern toward the idea of making concessions to women. Along the way, it becomes associated with the fear of the women's power to make children in spite of men's wishes and, for some, arrives at the notion that contraception is a matter for the couple, both man and woman.

### **Concluding Remarks and Policy Recommendations**

Looking at reproduction from a male point of view makes it possible to clarify areas that have remained opaque in approaches to the topic from the women's standpoint. The theoretical perspective of gender stresses the power relations between men and women, seen as socially constructed poles of a

relationship. Studies from this perspective have been able to demonstrate the mechanisms of subordination of women, based on a naturalized conception of maternity and of femaleness. The present study, drawn up from a male point of view, shows that it is possible to broaden the analytic power of the gender approach, by bringing in aspects for an understanding of the dialectics between male and female.

The aspects brought to light show that contraceptive practices, as experienced by men, can best be understood as part of the dynamics between the genders, confirming expectations of other specialists in the field. (Edwards, 1994; Chikamata, 1996) The study reveals that men are led to participate in contraception because of the involvement with their partners and are thus forced to seek alternatives for difficulties that arise with one method or another. They become involved almost because they have no other choice. On the one hand, they must deal with the women's complaints or preferences. On the other, they have been forced to face up to the possible and real consequences of their minimal or non-existent concern with the implications of their sexuality. The practice of this sexuality is a cultural exigency for the male gender. In the naturalized conception of the genders with which they operate, just as the women are made to have children, the men are made to have sex. And, if facing an abortion of a unwanted pregnancy or the paternity of an unexpected or inopportune child leads the men to rebel against the women's "irresponsibility", it also makes them realize their own "irresponsibility".

In this particular, the study confirms observations made by other authors to the effect that the reproductive consequences of men's sexual practices seem to lead some of them to rethink their lack of concern in regard to contraception. (Edwards, 1994; Grady et al., 1996) Although the general outlines of the various studies may be different, the present study, like others, brings up aspects that document the fact that men tend to consider the context of the relationship with their partners when assessing an unexpected pregnancy. (Landry and Camelo, 1994; Gohel, Diamond and Chambers, 1997; Grady, Klepinger and Nelson-Wally, 1999)

Data from this study is surprising in that it stresses the importance of the condom and the rhythm method among the middle classes of the Brazil's largest metropolis. It also shows that there is neither lack of information nor difficulty of access to the methods available. The frustration with the experience of hormonal pills is undoubtedly part of the explanation for the importance given to the condom and the rhythm. The material suggests that freeing sex and dissociating it from reproduction, materialized by the advent of the contraceptive pill, have had to face arguments that attribute precedence to health. The younger generation, but not only it, seems to be more susceptible to arguments that see the pill as harmful to women's health, even though they considered it the ideal method. This data is consistent with other studies that mention a reaction to the side effects of hormonal pills. It may well be that the distinctive characteristic of the material is that middle-class men in São Paulo tend to take on as their own the arguments regarding the impact of the methods on women's health. In this sense, their reference for evaluating the alternatives for protection has become the reference of the other, and not only that of the men themselves. (Grady, Klepinger and Nelson-Wally, 1999)

The diaphragm is not seen as an important method, and the periodic injections and subcutaneous implants are even less important. The IUD is seen by many as a healthier alternative than the hormonal pills, or even the safest option, in view of the uncertainties of the combination of the rhythm method with the condom, so frequent in men's experience. However, for reasons that the material was not geared to answer, the IUD is not seen as a permanent method, and is often discontinued after some time in use.

Based on the material gathered and analyzed in this study, it cannot be denied that there is a basic issue involved, namely, that no method is absolutely good, solves all problems, or addresses all needs. This theme stood out as important in the experience of a social group in whose life style having children has become a matter of choice. From this point of view, the resource to surgical sterilization, male or female, is the alternative that emerges as the answer to this basic question. With surgical sterilization, worries come to an end and risks are apparently overcome. Nevertheless, if this assertion may have seemed true several decades ago, the emerging pattern of sequential marriages, with the increase in separations and divorces, sets up new obstacles to vasectomy and to surgical sterilization for women. The vasectomy finds an obstacle in the men's expectation that every woman wants to be a mother and in the gender exigency that the man must correspond to this expectation. However, besides men's fear of losing their ability to fecundate, Aids brings on worries of another nature for all of them, vasectomized or not. Especially in the eyes of the younger men, protection against infection by HIV leads to the need for undeviating use of the condom, especially in casual relationships. This is a problem for some of the many who confess that they have difficulties in adapting to the use of the condom. The material suggests, however, that the HIV/Aids epidemic in Brazil may possibly have the effect of consolidating the condom as the basic method for urban middle classes such as that of São Paulo.

Some recommendations can be made on the basis of the results produced by this study. First, the need for educational programs aimed at men, enabling them to deal with the dimensions of gender. The experience of a social stratum exposed to information and innovative ideas shows how traumatic learning to negotiate contraception can be for them. As was seen, this experience reflects socialization fashioned by conceptions that do not allow the men full access to the other gender. The new generations, however, show signs of change, and this leads one to believe that efforts aimed at broadening possibilities for reflection on gender dynamics would produce positive effects.

Second, the data suggests that the doors of the middle classes are open to increased use of the condom as protection against sexually transmitted diseases, especially HIV. The theme of double protection, however, still seems to be a concern for only a minority, and would deserve emphasis in educational campaigns.

Third, in view of the importance of health as a criterion in choosing a contraceptive method, it is suggested that studies be carried out to detect why women experiment with the IUD but do not continue using it. It would be extremely important to investigate the alternatives available on the Brazilian market and the difficulties women find in using them. Only in this way could this device be proposed for a publicity campaign geared to extending alternatives for contraception. The generality of the criticisms against hormonal pills bring up a further challenge, which leads to a fourth recommendation derived from this study. It is highly probable that the middle classes have access to low-dosage hormonal pills. It is therefore fair to suppose that the intolerance so often mentioned by the respondents also refers to such pills. It is important to verify this hypothesis. Secondly, it would be worthwhile to consider the possibility of refining the hormonal or other alternatives, which, without causing significant damage to health, and also without undesired side effects for women, might represent a greater number of choices available for contraception.



## ENDNOTES

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2 The term "married" is used to refer to any type of stable conjugal union involving co-habitation, regardless of the legal status of the relationship. The term "separated" is used to refer to individuals who have broken up a marriage and are not presently "married" again. They may be formally divorced or not.

3 Given the clandestine nature of abortions in Brazil, it is difficult to obtain reliable data as to this practice. See The Alan Guttmacher Institute (1994).

4 The hormonal pills were first put on the Brazilian market in 1965.

5 Only seven of the older men had their first sexual experiences with girlfriends, whereas 12 had their first such experience with penetration in contacts with prostitutes or domestic maids. One of the respondents began his sex life with a stranger after a Mardi Gras ball!

6 The moral norm adopted in Brazilian culture was that illegitimate sex could only be repaired by marriage. In the transition experienced by Brazilian society, this norm was extended to imply that sex between two young single persons, although concealed from their families, would be acceptable provided that the couple had a subsequent life project in view.

7 Free transcription of an excerpt from Interview 073, male, age 46, married, 2 children. For the non-Brazilian reader, "Corinthians" is the name given to a very popular soccer team in São Paulo, identified with the working classes and opposed to other teams which, in the vast pantheon of this national sport, are identified with the upper classes.

8 Of the 20 respondents in the younger generation, nine began their sex lives with prostitutes, eight with girlfriends or girls/women with whom they had some affective involvement, and three with other persons in different situations.

9 See the debate between Thomas Laqueur (1992) and Sarah Ruddick (1992) regarding paternity and maternity in the context of feminism. This is an excellent example of the traps involved in gender. See also Ramirez's (1999) courageous master's dissertation.

10 Five other members of the older generation and four of the younger group presented further considerations.

11 To be apt to fecundate, if the woman so desires, seems to be similar to the subjects' references to their frequent flirting practices in relation to women, as if they were always expected to show an attitude of seduction when in the presence of or in contact with the other sex. Attitudes of this kind often contain no intention of sexual conquest, and this at times surprises the subjects themselves in their discourse. At other times, subtle or explicit mentions are made to the fact that the men have to submit to the women's sexual initiatives or, in contrast, they may refer to themselves as "nice guys" because they resisted female harassment or were selective in their choice of partners, despite success with women. These different situations would also seem to constitute aspects of gender practices, based on the same principle of male availability.

12 There is no way of knowing how many pregnancies ended in abortion for each partner for the duration of the relationship. Leal and Fachel (1996) report a study carried out with couples in the city of Porto Alegre, Rio Grande do Sul, Brazil, where the women mentioned a higher number of abortions than their husbands, suggesting that some were performed without the men's knowledge.

13 When the IUD first came out in Brazil, the Roman Catholic Church reacted negatively and publicized the idea that it is an abortive method. This argument appears in some of the interviews, but not very strongly.

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