



“If I Am Ready”: Exploring the relationships between masculinities, pregnancy, and abortion among men in James Town, Ghana

Joe Strong^{a,*}, Nii Lartey Samuel Lamptey^b, Nii Kwartelai Quartey^b, Nii Kwartei Richard Owoo^b

^a Department of Social Policy, London School of Economics and Political Science, Houghton Street, London, WC2A 2AE, UK

^b Act for Change, P.O. Box JT 224, James Town, Accra, Ghana

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ABSTRACT

The ability to exercise full sexual and reproductive health and rights is shaped by the contextual environment, meaning that women and pregnant people must navigate patriarchal norms when seeking care. Despite growing evidence that men are able to influence pregnancy outcomes, there remains a paucity of research on how and why men are able to involve themselves in pregnancy and abortion decision-making.

This study interrogates the mechanisms that drive men's involvement in pregnancies and abortions in James Town, Ghana. Data from a survey (n = 296) and in-depth interviews (n = 37) were collected between July 2020 and January 2021. The mixed-method analysis critically examined the relationship between men's support for a pregnancy or abortion and their constructions of masculinities.

Findings framed sex and reproduction as both a facilitator and a threat to men's masculinity. Reproduction was an essential component of being a man. Men discussed the need to fulfil masculine ideals of being independent, provide financially, and be in an acceptable relationship in order to be 'ready' for fatherhood. However, men similarly operationalised the notion of 'readiness' as the driving force behind their involvement in abortion decision-making. As being a father without being ready could lead to social ostracism and derision, men discussed forcing their abortion desires onto their sexual partners and other pregnant people. Achieving masculine ideals, therefore, was a critical motivation for controlling women and pregnant people's bodies. Understanding the role of masculinities is critical in acknowledging the contextual and environmental factors that women and pregnant people navigate, which contribute to continued reproductive injustices.

1. Introduction

Sexual and reproductive health and rights (SRHR) demand bodily autonomy, freedom of choice, and access to care. Men are able to shape these conditions for women and pregnant people by maintaining and upholding patriarchal norms and structures through embodied masculinities (Connell, 2005; Connell and Messerschmidt, 2005; Wentzell and Inhorn, 2014; Lohan, 2015; Ampim et al., 2020; Shand and Marcell, 2021). Reproductive policies and programmes frequently individualise SRHR, placing responsibility on women and pregnant people, with limited acknowledgement of their lived realities (Kimport, 2018). This is despite the call to interrogate “male involvement” and engage with men at the 1994 International Conference on Population and Development, alongside the recent integration of gender mainstreaming in reproductive health in the Sustainable Development Goals (Goal 5) (Fredman

et al., 2016; Shand and Marcell, 2021).

Policy and programme-based efforts to address harmful patriarchal norms have sought to reshape rather than dismantle gendered power structures, meaning men continue to control normative sexual and reproductive environments (Connell and Messerschmidt, 2005; Almeling and Waggoner, 2013; Lohan, 2015). Most programmes and policies have responded to the need to include men in SRHR by approaching men “as partners” (Wentzell and Inhorn, 2014; Shand and Marcell, 2021). This reinforces assumptions that men are at best supportive to SRHR, and not critical for its fulfilment (Greene and Biddlecom, 2000; Almeling and Waggoner, 2013; Wentzell and Inhorn, 2014). Thus, policies continue to burden women and pregnant people with the responsibility of improving SRHR behaviours and health outcomes.

This is despite the role of men and broader, normative environments shaping how a person feels about their pregnancy (Macleod, 2016). It is

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* Corresponding author.

E-mail address: j.strong3@lse.ac.uk (J. Strong).

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essential to understand the mechanisms that drive men's attitudes and behaviours towards pregnancies and abortion, in order to meaningfully engage with how men impact women and pregnant people's reproductive choice, access, and autonomy (Basu, 1996; Dudgeon and Inhorn, 2009a,b; Dudgeon and Inhorn, 2009, 2009; Strong, 2022). Men can deploy gendered power dynamics to influence and involve themselves in the SRHR of others. For women and pregnant people seeking abortions, studies emphasise that their sexual partners can be crucial in providing or withholding the physical and emotional support, information and resources (e.g., finances) to access care (Varga, 2003; Freeman et al., 2017; Hook et al., 2018; Altshuler et al., 2021). A recent review of men's involvement in abortion emphasised the growing evidence, particularly from care-seekers, of men shaping a woman or pregnant individual's ability to decide their pregnancy outcomes and choose their desired care (Strong, 2022).

To understand men's roles more fully, this study utilises the pregnancy supportability framework (Macleod, 2016). The framework provides a lens to better understand the role of interpersonal and community level factors in determining pregnancy outcomes, including abortion. It is sensitive to how, for example, a change in partnership status, financial stability, or a community/global event, could shift a person from considering their pregnancy supportable and desiring a live birth towards seeking an abortion (Macleod, 2016). This study interrogates the constructions of masculinities among men in James Town, Ghana, to analyse how and why men are involved in pregnancy outcomes and decision-making. The evidence contributes to our understandings of how to engage men in future research, policy, and programming.

2. Study context

The social and economic importance of reproduction is significant in Ghana and part of gendered norms that privilege parents over adults without children (Atobrah, 2017; Bain et al., 2019). Evidence shows men's involvement in fertility decision-making in Ghana, including the association between men's characteristics and their ability to influence women's reproductive decision-making (DeRose et al., 2002; DeRose and Ezeh, 2005; Pearson and Becker, 2014). While contraceptive acceptance and access has increased and men's and women's fertility desires have lowered (Finlay and Fox, 2013, PMA2020, 2017), stigma by men towards women continues, particularly towards women who use contraceptives (Butame, 2019).

Ghanaian legislation provides three legal exemptions for abortion: foetal abnormality; maternal health; rape/incest. Recent estimates suggest an abortion incidence range of 30–61 abortions per 1000 women aged 15–49 years, equating to approximately 23% of all pregnancies in 2017 (Keogh et al., 2020). Many pregnant people self-manage their abortions outside of the formal health system, and – though self-management with medical abortion is medically safe – the use of pharmaceuticals, toxins, or herbal medicines to self-manage are associated with higher morbidity and mortality rates (Geelhoed et al., 2002; Aziato et al., 2016; Rominski et al., 2017; Bain et al., 2019).

Studies in Ghana emphasise that men are involved in the provision of support and finances for people seeking abortions, and can shape women and pregnant people's care pathways and desires to avoid formal health systems (Schwandt et al., 2013; Aziato et al., 2016; Bain et al., 2019; Marlow et al., 2019). Less is known about why men involve themselves in pregnancies and associated outcomes and how this shapes women and pregnant people's care.

3. Methodology

To generate data that could provide both depth and breadth, a multi-method, concurrent research project was designed, utilising a respondent driven sample quantitative survey (RDS) and nested in-depth qualitative interviews. The sample site, research design and

methodologies are detailed in the project protocol (Strong, 2021), including provisions that were made in response to COVID-19. (see <https://www.masculinitiesproject.org/> for the survey instruments).

4. Sampling

Any man over the age of 18 who lived or whose networks predominantly were based in James Town were included. Three researchers (NLSL, NKQ, NKRO) recruited 'seeds' from men they knew in the community, using a sampling matrix (Strong, 2021). A total of 306 men participated in the survey, with ten surveys (3.3%) being too incomplete to remain in the final sample. The final sample was large enough for a design effect of 3.88 which is sufficiently close to the recommended design effect of 4 recommended for regression analysis of RDS collected data (Wejnert et al., 2012).

A total of 37 men who took part in the quantitative survey were invited to take part in qualitative interviews. Initial qualitative interviews were selected to represent the range of age and sexual and reproductive health experiences among the survey respondents, and purposive sampling carried on until no new themes were created in the interviews. Men aged over 40 were purposively over-sampled, to reflect that these men were less likely to be represented in the quantitative survey due to age disparities in mobile phone access (Zupork Dome, Adu Duayedden et al., 2020).

The study was conducted in the respondent's language of choice (English, Twi, Ga or a combination of the three) and recorded. An external service transcribed these into English, which were then checked by NKQ to ensure full meanings were captured. The original language was kept and explanation in parentheses for when idioms, colloquialisms, or concepts were used that had no transliteration.

All members of the research team were trained in research ethics, informed consent, and the different research techniques required for a survey and interviews. Informed consent was translated in Twi and Ga and read to participants, allowing space for any questions. The research team were also trained on SRHR service provision and support in the study location, in case participants requested more specific information.

Ethical approval for this research was obtained from the Ghana Health Service Ethics Review Committee (GHS-ERC 008/11/19) and London School of Economics and Political Science (REC ref. 000802c). Approval was also sought and obtained from the Ghana Health Services Regional Director for Greater Accra, and community stakeholders in James Town.

5. Mixed methods approach

Quantitative survey responses, which included open and closed questions, were read through by JS as they were collected to identify emerging themes. Qualitative interviews were also read through, and the themes that were uncovered from initial readings of both tools were used to develop the qualitative codebook. Once data collection was complete qualitative and quantitative data were read through in conjunction, to continue identifying key themes. These were used to decide which quantitative variables were of interest for the analyses.

5.1. Qualitative analysis

The abductive approach required an in-depth understanding of key theories related to this study – masculinities and pregnancy supportability – in order to facilitate the process of going between interview observations and theorisations (Timmermans and Tavory, 2012; Tavory, 2014; Earl Rinehart, 2020). The puzzle identified in this process was the pluralistic, incongruous nature of men's attitudes towards pregnancies and abortions.

To unpack this further, transcripts cyclically were read and re-read to create relevant 'codes' (Miles et al., 2020). These codes were grouped into themes (Braun and Clarke, 2006), analysed using Dedoose Version

9.0.46 (Dedoose). Transcripts were read by JS to familiarise with the themes, and each survey contained a feedback form for the research team to record their reflections. All of this information was then used to develop a codebook to capture key themes.

Two themes were developed in response to the constructed ‘puzzle’ in the qualitative data, which are presented in this paper. The first was that men’s idealised masculinities were situated within a broader, unexpected construct of ‘readiness’, referenced across different interviews. The second theme was how this construction of readiness was explicitly tied to the plural and relational nature of pregnancy and abortion supportability among men.

5.2. Quantitative analysis

Quantitative data were analysed using RStudio Version 1.4.1717. Volz-Heckathorn weights (“RDS-II”) were applied, which used the inverse probability of a respondent being chosen based on their personal network size (Volz and Heckathorn, 2008, Yauck et al., 2021). Clustering at the recruiter level was accounted for and all seeds ($n = 26$) were excluded from analysis as required for RDS (Wejnert et al., 2012; Yauck et al., 2021).

The quantitative analysis focused on two outcomes of interest, in order to examine the relationship between reproduction and masculinities: pregnancy supportability and abortion supportability. Supportability of pregnancy was measured through the question “Would you be happy if [insert relationship] becomes pregnant now?”. Responses were coded as binary for currently supportable or currently unsupportable. The question was asked in relation to men who reported currently having a partner ($n = 174$) and repeated in relation to each partner for men with multiple partners ($n = 223$). Logistic regressions were run for each sample.

To understand abortion supportability, men were asked whether they would hypothetically support different sorts of relationships with women obtain abortions using a survey matrix. A sum score was created to indicate the supportability of abortion. A response of “don’t know”, “no”, or NA scored zero. “It depends”, scored one, whilst “yes” scored two. This makes the scale sensitive to degrees of supportability – where the maximum (score = 22) could be seen as largely supportive of abortions while the minimum (score = 0) as consistently unsupportive. Poisson regressions were run for abortion supportability (Model 3), with a full sample excluding seeds and incomplete surveys ($n = 270$).

5.3. Explanatory variables

Age groups categories were created to allow for a reasonable size within each, whilst also reflecting context specific social age groups. As such, 18- and 19-year-olds were made a single group, as the differences between an 18-year-old and a person in their early twenties is likely to be greater than, for example, the differences between men in their thirties.

Men were asked to describe their sexual relationships in their own words in an open-ended question. Responses were then categorised into five variables – married; second wife/long-term partner; intimate partners; girlfriend; unpartnered. A dummy variable was made to indicate whether men had multiple relationships or not.

Ethnicity was recorded based on contextually relevant ethnic groups and then these were combined where the number of respondents was low – Akan and Asante were combined due to their historic and cultural links (Akyeampong and Obeng, 1995). Remaining ethnicities – Hausa, Mosi, Ga-Dangme – were categorised as ‘Other’. Current educational attainment and whether a man was religious were also included. The latter is a binary variable, in which men who reported observing a religion were coded as religious and men who reported no religious affiliation were coded as not religious.

A wealth index was created through a Principal Components Analysis (PCA), in line with recommendations (Fry and Chakraborty, 2014)

recommendations informed by Filmer and Pritchett’s methodology (2001). Housing materials and water source were recoded to be binary higher quality materials/sources and lower quality materials/sources based on contextual knowledge of the area.

6. Considerations

Reflections on the impact of COVID-19 and the method change to mobile-phones are outlined in the study protocol (Strong, 2021). While the sample size means that the data gathered are not representative, James Town was purposively chosen as a study site in part because it represents an area where access to care is more limited, and where more people seek informal than formal abortions (Strong, 2021). Thus, it is a community that can be informative for similar contexts.

The evidence relies on self-reporting and, therefore, must acknowledge the impact of social desirability, sensitivity, and bias in men’s answers. However, mobile-phone methods and the lack of spatial and temporal limitations on the data collection tools (respondents could stop and restart easily or hang up without cause for concern about leaving the interview space), allowed for greater respondent control of the data collection process. Men’s answers were detailed and the provision of sensitive information around sex, sexualities, and reproduction suggests that men were largely comfortable talking on the phone.

7. Reflexivity

This study was conceptualised, funded, and led by a researcher in the Global North, situated in an institution in London. To mitigate the creation of an extractive research, a scoping trip was conducted and a partnership with a local organisation Act for Change (<https://act4changeh.jimdofree.com/>) was developed (Strong, 2020).

Along with a rigorous training and hiring process to build a research team of men from the James Town community, the trip and partnership was used to develop a study that would collect relevant and useful information for practitioners, advocates, and activists in Ghana. The research tools were drafted by JS and workshopped with the research team to discuss meaning and relevance. Cognitive survey interviewing with men ($n = 39$) in a nearby community was used to iterate the tools and make them contextually relevant.

Due to the pandemic, JS was not able to conduct any primary data collection from the UK. Therefore, the respondents were talking to a research team from their own area. This could result in the potential for ‘insider’ influence on the responses. Operating strict confidentiality, and the use of mobile phones, allowed for separation between the respondent and the researcher. Moreover, the interest in normative environments and the constructions and presentations of masculinities means that even if respondents provided socially desirable answers, these were useful for our analysis of the expectations and the perceptions of critical concepts.

8. Sample description

51% of respondents ($n = 151$) were aged under 25 (Table 1), which might reflect a combination of both the sample method – using mobile phone technology and the research team’s personal networks – and the relatively youthful age structure of Ghana, with an estimated 58% of the urban population aged under 25 (Ghana Statistical Service, 2014). Most respondents had at least one current relationship, of which around half described having a ‘girlfriend’, and roughly a third of respondents were a carer/parent. Approximately half of respondents had some form of work. The characteristics of this sample are broadly comparable with general socio-economic and demographic characteristics at the national and regional levels (Ghana Statistical Service, 2014, Ghana Statistical Service et al., 2015).

Table 1
Sample descriptions.

		Quantitative	Qualitative
N		296	37
		N (%)	N (%)
<i>Seeds</i>		26 (9)	-
<i>Age</i>	18–19	43 (15)	7 (19)
	20–24	108 (36)	7 (19)
	25–29	69 (23)	6 (16)
	30–39	33 (11)	7 (19)
	40+	43 (15)	10 (27)
<i>Education</i>	Primary	23 (8)	5 (13)
	Middle	90 (30)	14 (38)
	Senior	144 (49)	14 (38)
	Higher	39 (13)	4 (11)
<i>At least one occupation</i>	Yes	164 (55)	23 (62)
	No	132 (45)	14 (38)
<i>At least one partner/relationship</i>	Yes	200 (67)	31 (84)
	No	94 (32)	6 (16)
	Don't know/Did not answer	2 (1)	-
<i>Currently a father/guardian/carer</i>	Yes	114 (39)	19 (51)
	No	182 (61)	18 (49)

9. Results

Men’s constructions of masculinities had an explicit and direct impact on their attitudes and behaviours towards pregnancies and their outcomes. This was evidenced by the emergence of two key, linked themes during analysis. The first theme ties together evidence on how men construct their masculinities. It unpacks the relationship between masculinities, sex, and fatherhood, the concept of ‘readiness’ in men’s narratives, and perceived consequences of failure to fulfil masculine norms. Quantitative evidence on pregnancy supportability is used to explore critical associations among the sample. The second theme explores the connection between masculinities, readiness, and abortion, utilising quantitative data to explore abortion supportability among men. It examines how attitudes and behaviours are situational and reflect a man’s relationship with the pregnant person.

10. Constructions of masculine ideals are embedded in notions of ‘readiness’ to parent

Within both quantitative and qualitative data, men indicated the complex and dynamic nature of idealised masculine norms. The behaviours and attributes that aligned to these masculine ideals developed as men progress from adolescents through to older ages, and required continual upkeep.

10.1. Masculinities, sex, and fatherhood

Men’s idealised form of masculinity presented in the interviews emphasised sex, relationships, and fatherhood. Sex was frequently mentioned by men across age groups as something that is not only part of the process of ‘becoming’ a man, but also an outcome of ‘being’ a man.

R: We always say that it is something you can’t take away from a man, if you are a man you can’t say you can never have sex

18-year-old, currently in a relationship, no children

R: If you are a man you must be able to impregnate someone

26-year-old, currently in a relationship, no children

R: That is what I am telling you that life like the problems in work like we know but I see it that if a man impregnates someone and he accepts it, that shows he is a man

58-year-old, currently in a relationship, 7 children

Reproduction and masculinities are deeply interlinked – with sex and

reproduction embedded in dominant ideals of masculinities. Men framed the need to be reproductive – to be having sex and becoming and being fathers – as both an external (community) and internal (personal) expectation. The second respondent outlines that a man – and by extension, the person he has sex with – is fertile and a pregnancy is possible, embedding negative values towards infertility into constructed masculinities. These respondents build on the connection between sex and reproduction. The final respondent’s reference to the notion of ‘accepting’ a pregnancy introduces the key question of this study of what constitutes an acceptable – and supportable – pregnancy to men.

To critically examine the factors that were associated with men’s propensity to support a pregnancy, quantitative data were investigated. **Model 1** uses a sample of men and their primary partner, while **Model 2** accounts for all current partners for men with more than one current partner.

Model 1

Pregnancy supportability binomial regression for primary partners

Variable		Coef	Lower CI	Upper CI	Sig
Intercept		0.21	-0.22	0.65	
Age	18–19				
	20–24	0.22	-0.01	0.45	
	25–29	0.30	0.04	0.57	
	30–39	0.21	-0.12	0.54	
	40+	-0.15	-0.50	0.19	
Ethnicity	Ga				
	Ewe	-0.16	-0.42	0.10	
	Fante	-0.15	-0.40	0.10	
	Akan	-0.06	-0.31	0.19	
	Other	0.19	0.01	0.37	
Religious	No				
	Yes	0.06	-0.23	0.36	
Parenting	No				
	Yes	0.05	-0.10	0.19	
Multiple Relationships	No				
	Yes	0.11	-0.06	0.28	
Relationship Type	Married				
	Second wife/Long-term partner	-0.27	-0.50	-0.05	
	Intimate partner	0.09	-0.18	0.37	
	Girlfriend	-0.12	-0.30	0.05	
Wealth Index	Low	0.07	-0.09	0.23	
	Middle				
	High	0.26	0.10	0.42	**
Working	No				
	Yes	0.29	0.15	0.43	**
Education	Primary	0.02	-0.27	0.31	
	Middle				
	Secondary	-0.09	-0.26	0.08	
	Higher	-0.47	-0.74	-0.21	**

* = p < 0.05, ** = p < 0.01, *** = p < 0.001.

The results in **Model 1** emphasise the significance of wealth and finances. Men who belonged to the highest wealth group had 0.26 higher log odds of supporting a pregnancy than men in the middle wealth group. Similarly, men who were working had 0.29 higher log odds of supporting a pregnancy than those not working. Men who attained higher education were significantly less likely to be supportive of a pregnancy than those who attained middle school (lower log odds of -0.47), suggesting that men with the means to access higher education have different reproductive attitudes than other men.

Model 2 indicates the same trends as **Model 1** for wealth, working, and education. However, the results also emphasise that the type of relationship has important implications. Compared to being married, if men are referring to a long-term partner or a girlfriend had lower log odds of supporting a pregnancy (-0.28 and -0.17 respectively). Finally, compared to 18-19 year-olds, men aged 25–29 had 0.27 higher log odds of supporting a pregnancy.

Model 2

Pregnancy supportability binomial regression for multiple partners

Variable		Coef	Lower CI	Upper CI	Sig
Intercept		0.18	-0.20	0.57	
Age	18-19				
	20-24	0.22	0.01	0.42	
	25-29	0.27	0.03	0.50	*
	30-39	0.16	-0.13	0.46	
	40+	-0.16	-0.47	0.15	
Ethnicity	Ga				
	Ewe	-0.23	-0.45	-0.01	
	Fante	-0.20	-0.43	0.03	
	Akan	-0.06	-0.29	0.18	
	Other	0.12	-0.05	0.28	
Religious	No				
	Yes	0.01	-0.28	0.30	
Parenting	No				
	Yes	0.09	-0.03	0.22	
Relationship Type	Married				
	Second wife/Long-term partner	-0.28	-0.49	-0.06	*
	Intimate partner	-0.01	-0.26	0.23	
	Girlfriend	-0.17	-0.32	-0.02	*
Wealth Index	Low	0.01	-0.14	0.16	
	Middle				
	High	0.25	0.12	0.39	***
Working	No				
	Yes	0.34	0.21	0.46	***
Education	Primary	0.06	-0.20	0.33	
	Middle				
	Secondary	0.02	-0.13	0.17	
	Higher	-0.31	-0.56	-0.07	*

* = p < 0.05, ** = p < 0.01, *** = p < 0.001.

Both models emphasise that working and wealth are significant, in both instances, men with higher wealth and men who are working more likely to find a pregnancy supportable. Thematic analysis of the qualitative interviews allows for an interrogation of these findings, by exploring in greater depth the reasons for men's attitudes towards pregnancies.

During interviews, men described the importance of being 'ready' for sex and fatherhood. These were not necessarily synchronous – i.e., one was not expected to be ready for sex and at the same time ready for fatherhood. This crucial complexity – of needing to be sexually active whilst also avoiding pregnancies before being ready – was a critical area in which dominant constructions of masculinities could be undermined. Particularly among older interview respondents, having sex and/or children before being ready was undesirable.

Men most frequently discussed the role of resources in relation to 'readiness', particularly readiness for fatherhood. This entailed a combination of having work, a place to sleep, and/or the resources to provide for children – e.g., food and school fees. The majority of respondents linked this explicitly to access to finances.

R: A man must have a good job and also have a place to sleep ... and if you are not working too it makes the child struggle, the child cannot get to the level he/she needs to get

36-year-old, currently in a relationship, 1 child

R: ... for the man he takes care of the family so he is the head of the family. He goes to work to bring money and then gives to the wife to take care of the children.

57-year-old, currently in a relationship, 5 children

Some respondents focused on the practical realities of resource acquisition and access to finances; in particular, to cover food, clothing, and school fees. Others situated this in their broader expectations of gender roles, specifically that women were expected to be 'carers' while men should act as 'providers'. Underlying these two response types were how finances and readiness could determine whether sex and pregnancy

(and then fatherhood) were supportable, with these being critical milestones in fulfilling masculine expectations.

The predominant focus on finances, and the role of finances in obtaining resources, within the interviews complements the strong quantitative association between whether men were working and whether they would be happy for their partner to become pregnant. The precarity of paid labour among the sample, in which 55.4% reported working, points to a fragile environment for men to fulfil ideals of readiness. For many men the potential of pregnancy being unsupported could be high.

Intertwined with desires for financial stability and resource access was the need for independence, particularly from parents. Men linked certain living conditions, particularly having a 'room' [living unit] of one's own, as a necessary requisite for fatherhood, which requires finances. Other forms of independence could include ensuring that becoming a father would not be disruptive to a man's parents.

R: He must get cloths and his personal things [ehewɔɔ nibii] [...] there are some who don't even have a rag but are going to have a child to disturb his parents

39-year-old, currently in a relationship, 5 children

Being considered irresponsible was antithetical to achieving masculine ideals among men. The respondents' negative attitudes towards men who are dependent (living with and/or relying on their parents) at the time of a pregnancy are indicative of the need for independence as a fulfilment of acceptable, valued masculine ideals. Access to resources is a critical component of readiness, as financial readiness is a proxy and facilitator for being independent and prepared specifically for a pregnancy and fatherhood. These idealised notions of independence were also embedded in some men's notions of when sex is acceptable.

R: ... but I feel that if you are a man especially and you are not self-reliant, you don't have a good job, you don't have a good place to rely on I think you should be able to control yourself

36-year-old, currently in a relationship, 1 child

The quote highlights the imperative of being self-reliant; the respondent frames his sexuality in terms of control, that without the necessary components constituting 'readiness' a man should not have sex. This emphasises the complexities of navigating masculinities, wherein sexual relationships are a means to perform masculinity, yet also can undermine masculine ideals where a man is not 'ready'.

The focus on independence and self-reliance within interviews complements the survey data. In this study, the wealth index draws on available data on materials a home is made from, water supply, and working items within the home. Alongside material wealth and paid work, the qualitative data allows for greater insights into the interconnectedness of independence with pregnancy supportability.

In addition to the idealisation of independence, the type of intimate relationship was significant in the quantitative results and an important component in men's constructions of being 'ready' for a pregnancy in the qualitative evidence. Respondents constructed the notion of the ideal woman to have sex and parent with based on various characteristics, including her family, and her interactions with her partner:

R: If you are going in for a woman you have to look at the woman, where she comes from, the home she is from, her parents, are they neat people, do they have good behaviour, are they good people, is she well trained, is she educated, she is a good woman she knows how to humble herself for a man and things, then [he] can have sex with her.

27-year-old, currently in a relationship, one child

This process of identifying some women as 'acceptable' partners was

a consideration in whether a man is ready to have sex, again creating boundaries and thresholds to navigate in attempting to achieve masculine expectations. The respondent describes gendered power dynamics – in which a woman would “humble” herself – in his construction of an acceptable relationship, illustrating masculinities built on power hierarchies between genders. For other men interviewed, ensuring not only that the woman fulfilled gendered expectations, but also that the relationship with that woman was acceptable, was important.

R: My friends see a good man as someone who is with a woman but would never have sex with her until he marries her, so when he sees him he can say this person is a good man and the other person is not, you understand

28-year-old, currently in a relationship, no children

For men, an ‘acceptable’ partner, within an ‘acceptable’ relationship, was integral to being ready for fatherhood. For many respondents, that form of relationship was marriage. The respondent above explicitly links that marriage is the optimal mechanism through which to demonstrate he is a good man. The results of the quantitative data, in which all relationship types had a negative association with pregnancy supportability compared to marriage, are emblematic of this idealisation. Interviews show how marriage can be a means through which to prove manhood, and to ensure that both sex and fatherhood are socially acceptable.

10.2. Inability to fulfil masculine ideals

‘Readiness’ and the constructions of masculine ideals were not simply theoretical exercises with no meaning among participants. Men expressed concern that there would be real consequences for the inability to fulfil masculine ideals around fatherhood. Respondents discussed how being unable to fulfil the tenets of readiness meant that their desired masculinity was undermined, and they could face shame, ostracism, and ridicule within their communities.

R: Let’s assume that you have to play your part fending for your family and you need finances to do that, so if you can’t fend for your family then you become less powerful, you will become a form of mockery to others citing that you are a lazy person and all those things

40-year-old, currently in a relationship, no children

R: Most of the time you only see a woman shouting on the streets of James Town the man cannot fulfil his responsibilities. Someone would give birth with a man and the person cannot pay the child’s school fees

20-year-old, currently not in a relationship, no children

These interactions between men and their communities were often centred around the notion of good and bad fatherhood. Readiness is, therefore, an important mechanism to ensure inclusion and respect as a man within the community. The complex relationship between masculinities and sex and fatherhood, at once driven by these behaviours and attributes and made vulnerable by their occurrence when not ready, shapes pregnancy supportability. Thus, it is essential to explore how masculinities shape men’s real or potential responses to a pregnancy and its potential outcome.

11. Readiness to parent shapes pregnancy and abortion supportability among men

Interview respondents made clear that masculine ideals were a key determinant in their readiness for sex and fatherhood. The consequences of being unable to fulfil these, for example by not being sexually active or not being able to provide for children, could lead to stigmatisation and shaming by their partners or other members of their community.

Men explicitly linked the notion of being ‘ready’ to their decision to support an abortion. In discussions of abortion, readiness not only

shaped the supportability of a pregnancy – or abortion – but was operationalised by men to support or pressure a person into obtaining an abortion.

IN: I am saying abortion, what is your opinion on abortion?

R: It would depend on when I give birth what the child would eat, if I have money it would determine if I will abort it or not. If you don’t work, you can’t give birth

20-year-old, currently in a relationship, no children

In the quote below, the respondent directly links his readiness to be a father with ‘forcing’ his partner to obtain an abortion.

R: I am the one who force her to do it because I had made up my mind that ... She got pregnant and I wasn’t ready to have a child.

42-year-old, currently in a relationship, 2 children

This quote exemplify the link between readiness and abortion, and that men use abortions a mechanism to control reproduction in order to preserve their masculinity.

Men also emphasised how the type of relationship shaped their attitude towards abortion. Relationships or sexual encounters that were less socially acceptable – where a possible pregnancy was considered unsupported – were often described by men as a core underlying reason to support – and possibly pressure – for a person to obtain an abortion.

Some men considered abortions to be within their decision-making control – there was rarely an acknowledgement of the desires of the pregnant person. Some men did discuss readiness beyond themselves, though it is notable that in the response below, the man still considered it his place to “tell” the pregnant woman what she must do.

R: There are days you feel for sex and desire to have sex and maybe the woman you desire is also not ready so when you meet someone on the street you have to satisfy your desire first but if that happens and you impregnate the lady you must tell the lady to go and abort the child

55-year-old, currently in a relationship, 4 children

The quote emphasises the importance of relationship type by explicitly linking the necessity of an abortion to the nature of the sexual encounter. The emphatic language used is indicative of the attitude men had and of their belief in their right to involvement in pregnancy or abortion decisions. If the pregnancy is with someone either less known to a man, or who is not the person the man wishes to have a relationship with, it becomes unsupported.

Among survey respondents, 84.8% of men indicated that they would not support their current (or hypothetical) partner obtain an abortion. Of men in multiple concurrent relationships ($n = 37$), 19 men held a consistent view regardless of the relationship/partner, while 18 men had different abortion attitudes depending on which relationship/partner they were asked about (data not shown).

All men, regardless of relationship status, were asked whether they would support a number of different relations of women obtain an abortion in the survey (see Table 2). 60% ($n = 162$) of men reported that an abortion was unsupported regardless of the type of relationship they were asked about (data not shown), while 40% ($n = 108$) men answered that it depends, or that they would support an abortion for at least one relationship type. Only one man answered that he would support an abortion for any relation of person.

Abortions were most supportable for second wives, girlfriends, and schoolgirls, while they were least overtly supportable for other relatives (daughters, sister-in-law, wives). The survey captured qualitative data on men’s reasons for their non-/support. For sisters and sisters-in-law, men felt that it was not their place to support, instead implying that it was the partner or husband who should be involved. For schoolgirls and daughters, men inferred that as a good father their priority was their

Table 2
Survey responses (N = 270) to whether the respondent would support specific (hypothetical) people obtain an abortion (%).

	Yes	No	It depends	Don't know	Did not answer
Wife	3.3	85.2	11.1	0.0	0.4
Second wife	10.7	77.4	10.4	1.1	0.4
Girlfriend	9.6	78.9	9.3	8.9	0.7
Sister	3.7	83.3	11.9	0.7	0.4
Sister-in-law	3.3	88.5	7.0	0.7	0.4
Daughter	3.3	85.6	10.4	0.4	0.4
Other relative	2.2	89.3	8.1	0.0	0.4
Friend	5.2	85.6	7.8	0.7	0.7
School girl	10.0	80.7	8.5	0.4	0.4
Sex worker	5.2	90.0	2.6	1.9	0.4
Colleague	4.8	88.5	5.6	0.4	0.7

children finish school. The table highlights the nuance and roles that men saw themselves having in the pregnancy and outcomes of different women – and the men they believed ought to be involved.

The results from **Model 3** add further depth to the role that relationality had on men's attitudes towards abortion. Men in multiple relationships had an associated abortion supportability score 1.24 higher than those not in multiple relationships, meaning that they were significantly more positive towards abortions.

Moreover, men who had long-term partners (1.60), intimate partners (1.13), or were single (1.54) had higher associated abortion support scores than those who were married. These results are comparable to the significant associations in **Model 2**, suggesting that men who find pregnancies less supportable might have higher support for abortions. It reinforces the significant association between relationship type and decisions to support an abortion among men.

Model 3
Abortion supportability poisson regression results

Variable		Coef	Lower CI	Upper CI	Sig
Intercept		-0.82	-1.42	-0.24	
Age	18-19				
	20-24	0.71	0.35	1.09	
	25-29	0.58	0.17	1.01	
	30-39	0.55	0.08	1.04	
	40+	1.24	0.76	1.75	
Ethnicity	Ga				
	Akan	-0.29	-0.68	0.08	
	Fante	-0.10	-0.45	0.23	
	Ewe	-0.06	-0.44	0.30	
	Other	-0.65	-1.00	-0.33	
Religious	No				
	Yes	-0.64	-0.99	-0.27	
Parenting	No				
	Yes	0.37	0.14	0.60	
Multiple Relationships	No				
	Yes	1.24	1.02	1.46	***
Relationship Type	Married				
	Second wife/Long-term partner	1.60	1.24	1.95	***
	Intimate partner	1.13	0.84	1.42	*
	Girlfriend	0.38	0.02	0.74	
	Single	1.54	1.12	1.95	*
Wealth Index	Low	0.27	0.05	0.48	
	Medium				
	High	-0.72	-1.04	-0.41	
Working	No				
	Yes	0.60	0.39	0.81	*
Education	Primary	-0.61	-1.03	-0.22	
	Middle				
	Secondary	-0.05	-0.28	0.18	
	Higher	0.33	-0.01	0.67	

* = p < 0.05, ** = p < 0.01, *** = p < 0.001.

Men who were working were associated with a 0.60 increase in the relational scale, indicated more positive abortion support. This is

notable, as men who were working were also more likely to support a current partner become pregnant. For abortion supportability, the wealth category of a man led to no associated differences.

There are a number of possible underlying causes for this association. Men who work might have the finances and resources considered necessary to cover the cost of abortion, thus making abortion feasible as a pregnancy outcome.

R: You see some of the men do not work so if ... you got pregnant he would look for ways to get you money to go and abort
22, not in a relationship, no children

Moreover, it could be that men who are working already have financial obligations – including existing children – that mean that they are more inclined to support an abortion.

R: I have two [children] already and there is no good job attached to it, the door to door work is nothing to go by and I don't want to trouble the kids and trouble myself to put myself under work pressure
31-year-old, in a relationship, 2 children

However, even with financial obligations for men who are working, respondents in qualitative interviews were consistent and emphatic that a working man should support a pregnancy:

R: [...] a job is the issue. If he is working and has money and the wife is pregnant he cannot say go and abort, you see?
21-year-old, not in a relationship, no children

These nuances between the qualitative responses and the quantitative results suggests a need for further research. This includes the potential underlying factors such as increased financial obligations among working men, and the potential that men considered being supportive of an abortion distinct from their description of men who were not 'ready' pushing for abortions.

12. Discussion

This study provides critical and novel insights into the mechanisms that drive men's involvements in pregnancies and abortions. Men can have a significant impact on whether and how a woman or pregnant person can obtain the care they want. Men were clear in their constructions of masculine ideals that pregnancies and their outcomes were essential to control, and women's own bodily autonomy and choice rarely appeared in data. By understanding men's desires to determine pregnancy outcomes, this study contributes to our understanding of why women and pregnant people may choose pregnancy non-/disclosure and abortion self-management away from public scrutiny as a strategy to avoid navigating men and masculine norms (Freeman et al., 2017, Coast et al., 2018, Nandagiri, 2019; Berro Pizzarossa and Nandagiri, 2021).

Men's constructions of masculinities in James Town, Ghana, resonate with evidence from across the world, indicating the influences of global masculine hegemonies in idealising notions of men being 'breadwinners', reproductive decision-makers, and fathers (Connell, 2005; Connell and Messerschmidt, 2005). Men's constructions of masculinities are rooted in sex and reproduction – the appropriate timing of which is determined by men's 'readiness'. This research emphasises how readiness is intrinsically reliant on the fulfilment of masculine ideals. Men's attitudes and behaviours were shaped by their ideals and through their lived experiences. While they primarily discussed reproduction within partnered units, the normative environment, their interaction with the community around them, and their own constructed ideals had significant impacts on their support for a pregnancy or abortion. This includes men's assumptions that they can impose their desired outcome for a pregnancy on the pregnant person.

Sex and reproduction were not singularly supportable but defined by whether a man was ready – defined by his fulfilment of specific masculine ideals (Ouedraogo et al., 2020). Readiness was conditioned on the need for men to be mature, responsible, able to provide care or be seen to be striving to provide care, as well as in the context of a socially sanctioned form of fatherhood. Men emphasised the need to be financially stable and accrue resources, particularly to provide food, shelter, and clothing for children, which aligns to globalised, colonial ‘breadwinner’ models (Ganle et al., 2016; Pasura and Christou, 2017, Ampim et al., 2020; Dery and Apusigah, 2020). Financial instability threatened dominant masculine ideals (Izugbara, 2015), and was a key component in men’s decisions of whether a pregnancy was un/supportable and their desired timing for fatherhood (Smith, 2020). Given the high economic volatility of the area (Pasura and Christou, 2017, Ampim et al., 2020), the dominance of finances in masculine ideals links pregnancy supportability among men to macro-economic systems via constructions of masculinities.

Notions of readiness among men were tied explicitly to their justifications of their involvement in abortion decisions. Men across age groups emphasised the similar influence that individual expectations, interpersonal relationships, and community norms had on determining their support for an abortion. Attitudes and behaviours towards pregnancies and abortions were not static or consistent but situated within a man’s view of the nature of the relationship (Nandagiri, 2019). Men provided nuance on how their support is defined by the type of relationship, as well as continuing to emphasise that answers can vary depending on partner type (for men with multiple partners). Moreover, while most men shared similar views towards the need for finances and being ‘ready’, older men drew on personal experiences and circumstances when considering abortion, younger men had more idealised notions of abortion supportability rooted in desires and norms rather than experiences. This research develops evidence from within Ghana (Miescher, 2007) and in other contexts that emphasise the role of age, relationship type, and experiences on men’s attitudes towards abortion (Dalessandro et al., 2019; Marlow et al., 2019).

The collaboration with Act for Change and cognitive testing allowed for the development of questions relevant to the experiences of men in James Town, as well as capture the nuance and complexities of respondent’s lives. Cognitive testing with men in a nearby community created space to include questions that men considered relevant to their lives and to test understandings and assumptions within existing questions, while collaboration with a partner institute allowed for the co-creation of a study that generated dual-purpose evidence for research and activism. Moreover, the use of mobile technology provided men control of the research time and space, with men providing in-depth responses to the assumed-sensitive questions on sex, sexuality, and abortion (Strong, 2021). The combination of collaboration and methodological innovation generated evidence that is useful for both academic analysis and the creation of community-based programmes by Act for Change.

13. Conclusion

The findings in this study provide important recommendations for engaging men in sexual and reproductive health and rights. Current research and interventions on gender transformational change targeting men and boys have almost no components addressing safe abortion care (Ruane-McAteer et al., 2019). This study emphasises that men have a significant ability to shape the conditions under which women and pregnant people are navigating pregnancy and abortion trajectories. It is critical to address men’s roles in abortion to tackle reproductive injustice.

This research generates new insights into how masculinities are embedded in pregnancy and abortion supportability. The collaboration with Act for Change grounded these research insights in the James Town community and has resulted in a pilot (2022) of gender

transformational workshops. The experience during research data collection of how men desired spaces to talk about sex, sexuality, and manhood became an integral component of these subsequent pilot workshops.

Ghana’s *National Gender Policy (2015)* called for SRHR education in schools and bringing men into the policy’s “mainstreaming framework” (p.36). This research highlights how men were occupied with notions of ‘good’ fatherhood and the need to control reproduction until they were ‘ready’. Creating educational programmes that focus on sexual and reproductive autonomy, as well as positive, non-financial ways men can be supportive fathers, partners, family-members, and friends, would help transform masculine ideals. Social spaces designed for men to share their experiences of masculinities and to talk openly could help mitigate fears of not meeting masculine ideals and perceptions of judgement from the broader community. Community engagement - e.g., with media campaigns - that normalise child-free adults and men in non-financial care giving roles could also help to reshape norms that men should be fathers and breadwinners, which in turn drives men’s need to fulfil masculine ideals.

At the international global health policy level, programmes that grapple with engaging men and boys in abortion-related care – for example International Planned Parenthood Federation and UNFPA’s *Global Sexual and Reproductive Health Service Package for Men and Adolescent Boys (2017)* – continue to focus on men in their role as partner (Shand and Marcell, 2021). However, the relationality of attitudes and behaviours uncovered in this study indicate that efforts to create positive attitudes within a relationship dynamic might not necessarily have a consequential impact on attitudes elsewhere. This study highlights that grappling with masculinities as they are constructed at the individual and community levels is essential for understanding how men can shape the broader conditions under which women and pregnant people are able to access care.

Finally, within evidence-generation, research tools must recognise that attitudes and behaviours are not static but fluctuate. This includes creating qualitative and quantitative sampling frames that move beyond only sampling men in their role as a partner towards a broader population of men and boys, as in Promundo’s *IMAGES* survey (Barker et al., 2011). Such inclusion allows for a deeper understanding of norms and constructions of masculinities that are essential in a critical examination of the determinants of pregnancy and abortion supportability. This study illustrated that normative ideals within communities formed men’s notions of what was expected of them – as fathers, providers, and men. Future research should be conducted that incorporates all genders, in order to gain greater understanding of the construction of gender ideals at the individual and community levels. This will help generate evidence to inform policies and interventions that are designed to normalise positive and pluralistic expressions of gender.

Ensuring that questions relating to attitudes and behaviours are specific to relationship types and are asked about all the relationships a person reports, will allow greater analytic depth. The Demographic and Health Survey, a dominant tool for collecting SRH data across the world, does not incorporate a broad sample of men, and, in cases where there are multiple partners, multiple responses to attitudinal questions are not yet possible (Ghana Statistical Service, Ghana Health Service et al., 2015). These data are crucial for the creation of more nuanced attitudinal and behavioural transformation policies and programmes, and this study in James Town emphasise that questions should be repeated for each sexual partner to examine relational attitudes.

This study provides original evidence on the mechanisms that drive men’s involvement in pregnancies and abortions, contributing key knowledge to a current research gap. It develops understandings of the complex and nuanced constructions of gendered normative environments for future research to expand on. It is imperative to continue engaging and transforming masculinities, to ensure that universal SRHR and freedom of sexual and reproductive choice and autonomy is made a reality.

Credit author Statement

Joe Strong: Funding acquisition, Conceptualization, Methodology, Investigation, Supervision, Software, Data curation, Validation, Writing – original draft preparation, Writing – review & editing; **Nii Lartey Samuel Lamptey:** Methodology, Investigation, Supervision, Project administration, Writing – review & editing; **Nii Kwartelai Quartey:** Methodology, Investigation, Writing – review & editing; **Nii Kwartelai Richard Owoo:** Methodology, Investigation, Writing – review & editing.

Declarations of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

Data will be made available on request.

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