Information on Doctoral Thesis of Fellows Pham Thu Ha

1. Full name: Pham Thu Ha

2. Sex: Female

3. Date of birth: Mach, 8th, 1982

4. Place of birth: Mai Son-Son La

5. Admission decision number: 3202/QĐ-SĐH Dated: November, 8th, 2010 by President of The

VietNam National University, Ha Noi.

6. Changes in academic process: Decision number 923a/QD-SHD on adjusting the thesis title

dated: July, 6th, 2014 By the Rector of University of Social Sciences and Humanities, Ha Noi -

Vietnam National University, Hanoi.

7. Official thesis title: The role of ethnic Hmong men in the North West of reproductive health care

(case study Huoi A, Song Ma district, Son La province).

8. Majoy: Sociology

9. Code: 62 31 30 01

10. Supervisors: Prof. PHD. Pham Van Quyet

11. Summary of the new findings of the thesis:

- After International Conference on Population and Development (ICPD) held in 1994, Population and

Reproductive health care has atracted many coutries' interest. Vietnam recently has many studies

focus on the field of reproductive health care, especially reproductive health care for ethnic minority

groups. It is significantly noted that the study focus very little on men, and confined to sensitive issues

such as gay men, sex or infertility. However, the participation of men in reproductive health care is one of the important strategic of the ICPD in Cairo, thus calling for more research to further explore the

role of men in health care reproduction.

- Men from H' Mong group has somewhat realized thier own role in the implementation of family

planning and reproductive pregnant women' health care. This is shown in increasing percentage of

men understandding about family planning number of children allowed; age of marriage of young men

and women as per Vietnamese' law. Only half of men noticing pregnant woman need to be examined

on the basis of fetal health, rest and receive proper training. Although the understanding is just basic

but not indetailed like how many times pregnant women should have healthe check, the initial study

has been showed that men had an interest in the implementation of family planning and health care

for pregnant mothers.

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- The participation of men in implementation of family planning and maternal health care for pregnant is limited. It is men who decide the number of children in the family. In the study area, the number of children in Hmong family is 4 to 5; no one stoop at 2 as per Vietnammese law. Most men are married when at the age of 17 or 18. The rate of men usingg contraceptive method to share the burden with the new woman stands is over 10%. Men only care about the fetal sex rather than interest in maternal health and fetal development when going with their wives for health check. Hmong women still have to work until the date of birth delivery. Women dare not to express what they want and their desires for their husband, which leads to the wrong thoughts that they are not interested in anything but their duties and responsibilities of being wives and condemnation in public.
- Tradditional concept and custom like giving birth is women's responsibility or son is more important than daughters ect is one of barriers for men in implementation of family plannning and reproductive healthe care. Besides, limitation in reproductive knowledge and comunication from local agencie are also main factors. Health care centre or hospital often located in commune centre where is far from some ethic minority group is also a reason leading to mentioned matter.

It is concluded that men did not play their role well in reproductive health care for pregnant women and planning family. While men are more expected from society to share burden in shoulder's women in reproductive healthe care and during pregnancy and giving birth. However, the study result showed that men (in study area) has not proven their role well. The biggest barrier is tradditional practice and customs. Although some of them know more or less about family planning and reproductive health care, they still act as old custom It is far from mindset to action. The improvement still takes times and a lot of effort from the whole community.

- **12. Practical applicability:** A good reference for the planning and management of population and reproductive health, public health community and family ties, ethnic minorities; as well as a reference value in teaching, research in this field in our country today.
- **13. Further research directions:** Assigning the role of gender in the family of ethnic minorities in the Northwest; Problem female officers in the Northwest.

14. Thesis - related publications:

- Pham Thu Ha (2012), "The issue of maternal health care for pregnant ethnic Hmong Huoi A, Song Ma District, Son La Province", *Proceedings of the international conference of international experience sharing of social work and social welfare, National University Press*, pp. 638-647.
- Pham Thu Ha (2013), "The participation of the husband in health care for pregnant wifves in Hmong group", *Journal of Ethnic Studies* (4), pp. 34-43.
- Pham Thu Ha (2014), "Perceptions of the Hmong men who require routine antenatal visits for pregnant women", *Proceedings of the Conference Scientific Officer young and postgraduate students of the school year 2013 2014, National University Press*, pp. 813-822.