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Knowledge and Practices of Family Planning Among Married Men in a Selected Rural Community

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Abstract:

Background: Many developing societies are characterized by rapid population growth due to high fertility, declining infant morbidity and mortality and increased life expectancy. The study was aimed at investigating the knowledge and practice of married men towards family planning in Evuma community, Afikpo, Ebonyi State Nigeria and to ascertain the factors that militate against the practice of family planning.

Materials and methods: A descriptive survey design was adopted for the study while a convenience sampling was used to select the 270 married men in the community used for this study. A well-designed questionnaire was adopted and utilized.

Results: Major findings of the study revealed, that the level of knowledge of the married men in Evuma Community, Afikpo, Ebonyi State towards family planning was high (96.4%). There was significant association between age, educational status, marital type and number of children had and their knowledge of family planning ($p = .003, .000, .007$ and $.000$ respectively). However, it also revealed that the practice of family planning among the married was very low (40.4%). The natural family planning method that the men and their spouses practiced were calendar and lactational amenorrhea methods while the use of male condoms was the most practiced artificial family planning method. In addition, the major reasons for not using family planning include: contraceptives interfering with the body normal process (3.2 ± 0.9); the use of contraceptives is a sin before God (3.0 ± 0.9); peers would lose respect for them if they have a small family (2.9 ± 1.1) and that the side effects associated with family planning outweigh any benefits resulting from its use (2.9 ± 1.2).

Conclusion: The knowledge of family planning among married men of Evuma Community was high but the practice was very low.

Key Word: Family planning, married men, knowledge and practice.

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I. Introduction

Family planning refers to the practice that helps individuals or couples to attain certain objectives which includes regulating the interval between pregnancies, avoiding unintended pregnancies, controlling the time at which birth occurs in relation to the ages of the parents and determining the number of children in the family¹. It could also entail making decisions on the number of children couples want to have by using different methods to achieve that, ranging from contraceptives to use of condoms, male and female sterilization etc². There has been a lot of campaign on the use of family planning in Nigeria. However, a report of the National Population Commission indicates that family planning use is still low in the country³. The major reasons for the low use of family planning practices by couples and individuals in Nigeria can be related to lack of adequate information on the importance of family planning, cultural values, low education, poverty and poor access to information on contraceptive^{4, 5}. Cultural valuation of children has shown to be a strong factor negatively affecting family planning methods⁶. Other researchers, Bender & Fulbright⁷ and Sonenstein⁸ further opined that specific Sexual Reproductive Health (SRH) services available for young people in Nigeria have been focused predominantly on women hereby, neglecting men who are key players in the scheme.

The focus of family planning carried out by health workers in the past have been female- dependent. However, there has been a recent call by health workers for men's involvement in family planning⁹. Men's involvement in family planning refers to male acceptance of family planning or increasing men's practice of contraception measured by the popularity and prevalence of vasectomy and condoms¹⁰. Variable actions are recommended to help couples and individuals meet their reproductive goals and to increase the participation and sharing of the responsibility of men in the actual practice of family planning.

Despite the importance of involving men in family planning practices, the extent to which married men know and practice family planning in Evuma community, Afikpo, Ebonyi state Nigeria has not been ascertained

to the best of the researcher's knowledge. This study is therefore focused on determining the knowledge and practice of married men towards family planning in Evuma community, Afikpo, Ebonyi state.

II. Material And Methods

The study area is Evuma community, Afikpo, Ebonyi State, Nigeria which is one of the fifteen districts that make up present-day Afikpo. A descriptive cross-sectional survey design aimed at determining the knowledge and practice of family planning among 250 married men in Evuma community, Afikpo, Ebonyi state, Nigeria. This study was based on cross-sectional data gathered between February to April, 2019. The instrument used for data collection was a questionnaire that was developed by the researchers. The questions were structured in such a way that the researchers can easily achieve the objectives of the study. The study utilized a 56-item questionnaire with 4 sections; A, B, C and D. Section "A" contained 7 items on demographic information while Section B contained 26 items eliciting information on knowledge of family planning. Section C contained 12 items eliciting information on practice of family planning while section D contained 11 items eliciting information on factors influencing practice of family planning. This instrument was validated by five (5) experts (Three nurses, one doctor and one physiotherapist). Test-retest reliability of the questionnaire yielded a correlation coefficient of $r = 0.91$ ($p = 0.001$).

Descriptive statistics of frequency counts and percentages were used to summarize data. Associations between the Socio-demographic characteristics and their Knowledge of family planning were explored with chi square using a significant level of 0.05. Data analysis was done with the Statistical Package for Social Sciences (SPSS) (version 21).

III. Result

The study revealed that the mean age of the men was 34 ± 6 years. Table 1 showed the demographic characteristics of the participants. Table 2 shows the knowledge of family planning among married men as 241 (96.4%) of the men were aware of family planning with the major source of information coming from health workers 100 (40%). All (100%) of the participants knew about male condoms as a family planning method. The study revealed the knowledge of benefits of family planning among the married men as shown in Table 3. It indicates that the married men knew that family planning had the following benefits: useful to regulate intervals between births; useful to avoid unintended pregnancy, reduces the need for unsafe abortion and improves the health of mothers. Table 4 shows association between the socio-demographic characteristics of the married men and their knowledge of family planning using the chi square. Practices of married men towards family planning were explored in Table 5 while factors militating against the practice of family planning in Evuma Community, Afikpo, Ebonyi State were shown in Table 6.

Table 1: Demographic Characteristics of the Respondents (N = 250)

Variables	Options	Freq. (N)	Percentage (%)
Age	18 - 25 years	29	11.6
	26 – 33 years	83	33.2
	34 – 41 years	105	42.0
	42 years and above	33	13.2
Highest education	No formal	30	12.0
	Primary	34	13.6
	Secondary	122	48.8
	Tertiary	44	17.6
	Others	20	8.0
Religion	Christianity	228	91.2
	Muslim	13	5.2
	Traditional	9	3.6
Marital type	Monogamous	174	69.6
	Polygamous	76	30.4
Occupation	Civil servant	71	28.4
	Self-employed	93	37.2
	Employed by private sector	79	31.6
	Student	7	2.8
Number of child/children	1 – 2	36	14.4
	3 - 4	91	36.4
	5 - 6	110	44.0

	7 or more	9	3.6
	None	4	1.6

Table 2: Knowledge of Family Planning Among Married Men (N = 250)			
Variables	Options	Freq. (N)	Percentage (%)
Have you heard of family planning?	Yes	241	96.4
	No	0	0
	Not sure	9	3.6
Source of information	Television/radio	71	28.4
	Friends/relations	76	30.4
	Health worker	100	40.0
	Books	2	0.8
	Others	1	0.4
Which of the following family planning methods do you know of? **	Hormonal pills and injections		
	Male condom	226	90.4
	Female condom	250	100.0
	Spermicides	154	61.6
	Vaginal ring	71	28.4
	Intrauterine devices	38	15.2
	Lactational amenorrhea	5	2.0
	Female sterilization	176	70.4
	Male sterilization	118	47.2
	Vasectomy	204	81.6
	Diaphragm	81	32.4
	Calendar-based method	17	6.8
		246	98.4

** Multiple responses

Table 3: Knowledge of Benefits of Family Planning Among Married Men (n = 250)						
Item	SA (4)	A (3)	D (2)	SD. (1)	Mean	S.D.
Family planning is useful to avoid unintended pregnancy	86	120	18	26	3.1	0.9
Family planning is useful to regulate intervals between births	100	131	6	13	3.3	0.7
Family planning limits the number of people in a family	101	111	14	24	3.2	0.9
Family planning reduces the need for unsafe abortion and infant mortality	71	105	42	32	2.9	0.9
Family planning renders a man impotent	19	31	107	93	1.9	0.9
Family planning does not allow couples to enjoy their marriage life	126	89	16	19	3.2	0.9
Family planning allows for improved standard of living.	21	10	43	176	1.5	0.9
Family planning does not allow couples to have the desired number of children	124	95	18	13	3.3	0.8
Family planning improves the health of mothers	87	125	23	15	3.1	0.8
Family planning reduces pregnancy-related risks such as hypertension, uterine rupture, etc.	18	25	154	53	2.0	0.8
It ensures a low-birth ratio as a well as a low death ratio	31	41	44	134	1.9	0.8
Grand mean	784	883	485	598	2.7	0.9

Table 4: Association between the Socio-demographic Characteristics and Their Knowledge of Family Planning

		Knowledge of respondents		X ²	df	P-value
		Yes	No			
Age of respondents	18 – 25 years	11	18	.054	3	.003
	26 – 33 years	35	48			
	34 – 41 years	103	2			
	42 years and above	28	5			
Highest education	No formal	10	20	19.328	4	.000
	Primary	16	18			
	Secondary	67	55			
	Tertiary	44	0			
	Others	20	0			
Religion	Christianity	145	83	1.097	3	.778
	Muslim	6	6			
	Traditional	4	5			
	Others	0	0			

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Marital type	Monogamous	150	24	14.228	1	.007
	Polygamous	41	35			
Occupation	Civil servant	71	0	8.462	4	.133
	Self-employed	54	39			
	Employed by private sector	70	9			
	Student	4	3			
	Others	0	0			
Number of child/children	1 - 2	36	0	29.478	4	.000
	3 - 4	67	24			
	5 - 6	83	27			
	7 or more	1	8			
	None	3	3			

• **Chi-square test (level of significance at p < 0.05)**

Table 5: Practice of Family Planning Among Married Men (n = 250)

Variables	Options	Freq.(N)	Percentage(%)
Use of family planning method	Yes	101	40.4
Methods used			
	Natural	29	28.7
	Artificial	46	45.5
	Both	26	25.7
Type of natural family planning methods used			
	Calendar-based method	41	74.5
	Withdrawal method	14	25.5
Frequency of use			
Hormonal pills & injectables			
Implants	Never	70	97.2
Male condoms	Never	72	100.0
Female condoms	Sometimes	39	54.2
Intrauterine devices	Never	72	100.0
Lactational amenorrhea	Never	72	100.0
Tubal ligation	Sometimes	38	52.8
Vasectomy	Never	72	100.0
Emergency contraception	Never	72	100.0
	Never	72	100.0

Table 6: Factors that Militate Against the Practice of Family Planning in Evuma Community

Item	SA (4)	A (3)	D (2)	SD. (1)	Mean	S.D.
Peers would lose respect for me if I have a small family	88	100	16	46	2.9	1.1
The side effects associated with family planning outweigh any benefits resulting from its use	105	67	26	52	2.9	1.2
Contraceptives interfere with body's normal process	107	100	28	15	3.2	0.9
My partner does not support the use of family planning	17	10	42	148	1.5	0.9
Preferred methods are not available in my area	31	34	47	146	1.8	1.1
My family is a polygamous family	98	103	10	39	3.0	1.0
Contraceptives are prohibited in my community	12	10	43	185	1.4	0.8
The use of contraceptives is a sin before God	76	118	34	22	3.0	0.9
I am the head of the house and I decide when and how sexual relations with my spouse should be	100	125	13	12	3.3	0.8

My wife wants a child or another child	86	128	14	22	3.1	0.9
I don't know of any male-oriented family planning method	20	25	64	138	1.7	0.9
Grand mean	740	820	337	825	2.5	0.9

IV. Discussion

The study established that the level of knowledge of family planning among the married men in Evuma Community, Afikpo, Ebonyi State, Nigeria was high (96.4%). The major source of information was through sensitization from health workers at the health centres as well as from friends/relations. This view is consistent with that of Ahmed-Adams (2012) who revealed that a high level of awareness of family planning methods is made possible mainly through hospital campaigns followed by exchange of information between friends/relations. In addition, the major family planning methods known were male condom (100%), calendar-based method (98.4%), hormonal pills and injections (90.4%), male sterilization (81.6%) and lactational amenorrhea (70.4%). This view is supported by the findings of Gadalla¹¹, who posited that African men know at least one family planning method and that men are more likely to know about artificial methods (use of the condom) than natural methods (mainly periodic abstinence and withdrawal).

The benefits of family planning that majority of the married men knew include: it is useful to avoid unintended pregnancy; useful to regulate intervals between births; reduces the need for unsafe abortion and improves the health of mothers. However, the married men also had some misconceptions about family planning. Some of the misconceptions include: family planning does not allow couples to enjoy their marriage life and it does not allow couples to have the desired number of children. These findings imply that more sensitization is needed in Evuma community in order to correct the misconceptions held as well as provide promising solutions that will help overcome or lessen the barriers towards knowledge and practice of family planning in the community¹².

There was a significant association between the age of the married men and their knowledge of family planning ($P = .003$). A possible explanation for this finding can be deduced from the findings of UNFPA¹³ who revealed that age plays an important role in the process of deciding when couples will start and finish the process of giving birth as well as how long they have to wait after the birth of the next child. This view was supported by Jones et al.¹⁴, who argued that as couples get older, their need for contraception and the rate of contraception decreases. There was also significant association between the educational status of the married men and their knowledge of family planning ($P = .000$); between the marital type practiced and their knowledge ($P = .007$) as well as between the number of children had and their knowledge ($P = .000$). The finding on education is consistent with the view of Population Reference Bureau¹⁵ who stated that as the level of education increases, the number of children required decreases. This finding implies that there is the need to improve the access of young men in Evuma community to more formal education as this would help correct the misinformation and misconceptions held by some of the married men. This is also consistent with the view of Sato¹² who revealed that in societies with high levels of education and socioeconomic status, the need for contraceptive methods increases.

The study also revealed that the practice of family planning among the married men in Evuma Community, Afikpo, Ebonyi State, was very low (40.4%). This finding indicate a gap between the level of knowledge and the practice of family planning among the married men. This view is similar with that of Ghulam et al¹⁶, who revealed that majority of married men know about some modern contraceptive methods, but the overall contraceptive use was very low. However, it disagrees with that of Jumanah et al¹⁷ who revealed that majority of married men had good knowledge regarding the meaning, types and uses of contraceptives which resulted in high attitude and good practice pattern. These findings point to the fact that there is a very wide gap between the knowledge of family planning in Evuma community and their practice of family planning. This view was supported by Fapohunda & Rutenberg¹⁸, who posited that, in many other African countries, there exists a very wide gap between contraceptive knowledge and practice. They posited that current contraceptive use in Africa stood at 29 percent while knowledge was well over 80 percent¹⁸. This view is also consistent with the findings of Ahmed-Adams¹⁹ who revealed that was not every couple who approved family planning actually practiced it for reasons such as the fear of failure, cultural and religious prohibition as well as disagreements between couples.

Among those who were practicing family planning, the natural planning method that the men and their spouse practiced most was calendar-based method (74.5%) while the use of male condoms (54.2%) was the most practiced artificial planning methods. This view is consistent with that of Oluwasanmi et al²⁰, who revealed that condom was the most commonly known and used artificial family planning method.

Findings from the study indicate that there were factors influencing the practice of family planning among the married men in Evuma community, Afikpo, Ebonyi state, Nigeria. It revealed that the married men

were of the opinion that contraceptives interfered with the body's normal process and did not allow them enjoy their sexual relations with their spouses. Also, the men had the notion that decision-taking about sexual relations should be their responsibility and not that of the health workers. This view is supported with the findings of Stevie²¹, who revealed that cultural beliefs that equate family planning methods with interference in fecundity and fertility may argue against the use of these methods in the long term.

There were also some married men who were in a polygamous family structure and thus had to contend with the competition for children that comes from the different wives. There were also some men who were of the opinion that their peers would lose respect for them for not been 'man enough'. In other words, a small family size would denigrate their status among their peers. This findings point to the need for participation of men in family planning because men's positive approach makes it easier for women to access and use family planning services, and as a result, availability and continuity in services is ensured²². This view was also supported by Joesoef²³, who stated that husband's attitude may affect not only whether or not wives use contraception but also the choice of a method and how long it is used.

Furthermore, the study revealed that some of the married men still view the use of contraceptives as a sin before God especially when it had to do with artificial methods of family planning. From this standpoint, there were also some men who vehemently stated that that the side effects associated with family planning outweigh any benefits resulting from its use. Perhaps, this explains the reason why most men see family planning as a woman's activity as opined by Ademola et al²⁴. This is also consistent with the finding of Ghulam et al¹⁶, who stated that the reasons for not using family planning and artificial contraception include negative perceptions, in-laws' disapproval, religious concerns and side-effects.

V. Conclusion

This present study conducted among married men in Evuma community, Afikpo, Ebonyi state, Nigeria, concludes that the level of knowledge of family planning among the married was very good. However, the practice of family planning was poor. The major self-reported reasons for poor practice of family planning include: contraceptives interfere with body's normal process; the use of contraceptives is a sin before God; peers would lose respect if they have a small family and that the side effects associated with family planning outweigh any benefits resulting from its use. Therefore, the findings suggest that there is need for the family planning programme to promote the concept of family size limitation, rather than to promote family planning solely for birth spacing purposes since this practice has been found to dampen the effect of family planning on overall fertility in the community.

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