ORIGINAL RESEARCH PAPER
Volume - 11 | Issue - 07 | July - 2022 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

COMPARISON OF MALE AND FEMALE PARTNERS' KNOWLEDGE, ATTITUDE AND PRACTICE OF FAMILY PLANNING IN RURAL COMMUNITIES OF EBONYI STATE, NIGERIA

Obstetric & Gynaecology

John Ogbonnaya Daniel Aja National Obstetric Fistula Centre, Abakaliki, Ebonyi State, Nigeria

Adebayo Babafemi Charles Daniyan National Obstetric Fistula Centre, Abakaliki, Ebonyi State, Nigeria

Olapeju Wunmi Daniyan Alex Ekwueme Federal University Teaching Hospital, Abakaliki, Ebonyi State, Nigeria

ABSTRACT

Background: Male participation in family planning is encouraged to promote its acceptability and practice by their partners. We aimed to compare the knowledge, perception and practice of family planning among male and female partners. **Methodology:** It was a cross-sectional study carried out among married men and women in Abakaliki Local Government Area of Ebonyi State. Following ethical approval, interviewer-administered questionnaires were used to obtain needed information. The data was analysed using SPSS version 20. The mean median, mode and standard deviation were calculated for the responses. Categorical variables were compared using the chi-square test. A P-value of <0.05 was considered significant. The critical mean score for responses entered on the 5-point Likert scale was 3.0. Mean scores of 3 and above were considered good while those less than 3 were considered poor. **Results:** There were responses from 62 married men and 65 married women. Awareness about family planning was good among both men and women (P=0.085). However, the sources of their awareness on family planning differ significantly with 32 hearing about it over the radio and 45 women hearing about it in the hospital (P=0.000). The perception that family planning is the responsibility of both husband and wife was similar among the men and women (P>0.927). They both agreed that traditional family planning is acceptable (P=0.447). They both agreed the use of family planning is good for a healthy family (P=0.344). They both agreed that men should use family planning (P=0.625). Most men and women have never used any family planning method (0.934). Couples rarely discuss family planning (0.675). Also, couples rarely attend family planning clinics together (0.811). Majority of both men and women did not use any method (P=0.870) and when they use, they most commonly used method is the condom (P=0.944). Also, majority of both men and women did not discuss the methods with their spouses (P=0.944) **Conclusion:** Both men and women have good knowledge of family planning. Sources of information however differ significantly, being radio jingles for men and hospital visits for women. Both show poor uptake with majority not using any method. Spousal communication among couples and male involvement are poor. The male condom is the commonest method used by both men and women. We recommend policies that target the couple in family planning programs to encourage male participation as well as increase the uptake by both men and women.

KEYWORDS

Comparison; Family Planning; Knowledge, Attitude and Practice; Male and Female

BACKGROUND

Family planning is an effort by couple to reduce or space the number of children they have through the use of contraceptives. It promotes the human right of people to determine the number and spacing of their children (WHO, 2020). In addition to preventing pregnancies, some methods such as condoms also prevents transmission of sexually transmitted infections like HIV (WHO, 2020). It is associated with reduction in maternal mortality risks especially among adolescent girls (WHO, 2020). By reducing the number of unintended pregnancies, family planning is one of the strategies for the prevention of unsafe abortion (Faundes, 2012).

Family planning activities are traditionally targeted at women. A study in Northern Nigeria showed that although the knowledge of contraception among man was high, the attitude and practice was poor among them (Duze and Mohammed, 2006). In a study in South-West Nigeria however, both the knowledge and practice of contraception were high among men (Oyediran et al., 2002). Another study in South-West Nigeria showed poor involvement of men in family planning (Adelekan et al, 2014). Identified barriers to male involvement include the perception that that family planning is a woman's affair, custom, long waiting times, attitude of providers and finance (Adelekan et al, 2014). Olaoye et al (2015) however showed a high level of men's involvement and ruled out cultural factors as barriers. The knowledge of emergency contraception has also been shown to be poor among men (Karim et al, 2021). Male participation in family planning has been shown to promote its acceptability and practice (Ijadunola et al, 2010).

Despite being the key decision makers in our environment, men are usually given less attention and are less involved in issues of family planning. However, their perception on child spacing can greatly influence a woman's preferences and decisions (Oyediran et al., 2002). It is therefore imperative to give some attention on the perspective and involvement of men on the subject. The objective of the study is to compare the knowledge, perception and practice of family planning among male and female partners.

METHODOLOGY

Study Area

This research was carried out at Nkaliki Unuhu in Abakaliki Local Government Area of Ebonyi state. The state has 13 local government areas with Abakaliki as the capital. The majority of the inhabitants are peasant farmers.

Study Population

This was made up of married men and women 18 years and above who are natives and have resided in that area for at least two years.

Study Design

This is a cross-sectional study. in which two villages out of six were randomly selected.

Sampling Techniques/Criteria

Nkaliki in Abakaliki LGA was selected by purposive sampling based on unpublished data. The two villages out of six were randomly selected.

Study Inclusion Criteria

Married men and women within reproductive age who are indigenes and residents at Nkaliki Unuhu.

Study Exclusion Criteria

Those who are too ill to participate.

Instrument of Data Collection

This was interviewer-administered semi-structured questionnaire. Information obtained included: socio-demographic characteristics, knowledge, attitude /perception and practice of family planning as well socio-cultural factors affecting family planning acceptance.

Data Collection Procedure

Six research assistants who are literate and understand Abakaliki dialect were trained to guide the respondents when the questionnaire were administered. Three were males and three females. The benefits of family planning were highlighted, and issues of confidentiality, consent, data collection, documentation, filling and storage was emphasized. The villages were mapped and house enumeration done. Then house to house administration of questionnaire carried out according to the inclusion criteria. In other to minimize bias, the couples were separated while filling the questionnaires male research assistants attended to male respondents while female research assistants attended to the female respondents. The responses were entered on a 5-point Likert scale ranging from most negative response to most positive response with weight of (1) to (5) respectively.

Data Management/Analysis

The data was analysed using SPSS version 20. The mean median and mode and standard deviation were calculated for the responses. Variables were compared using chi-square test and t-test. $P<0.05$ was considered significant. The critical mean score was 3.0. Mean scores>3 were considered adequate and mean score<3 inadequate.

Ethical Consideration

Ethical clearance was obtained from the Ethics Committee of the Ebonyi state university, Abakaliki. A written consent was obtained from the respondents.

RESULTS

Questionnaires were administered to 62 married men and 65 married women with a response rate of 100%. Table 1 shows the demographic characteristics of the respondents. Table 2 shows the knowledge of family planning by the respondents. Awareness about family planning was good among both men and women (P=0.085). However, the sources of their awareness on family planning differ significantly with most men 32 (52.5%) hearing about it over the radio and most women 45 (69.2%) hearing about it in the hospital (P=0.000). The perception that family planning is the responsibility of both husband and wife was similar among the men and women (P>0.927) (Table 3). There is no significant difference in the attitude of married couples to family planning as seen in table 4. Both men and women did not agree that family planning is a woman's business (P=0.485). They both agreed that traditional family planning is acceptable (P=0.447). They both agreed the use of family planning is good for a healthy family (P=0.344). They both agreed that male family planning methods are equally as effective as female methods (P=0.554). They both agreed that men should take up the responsibility of using family planning (P=0.625). There is no significant difference in the practice of family planning as seen in table 5. Both the men and women rarely use family planning (0.934). Couples rarely discuss family planning (0.675). Also, couples rarely attend family planning clinics together (0.811). There is no significant difference in the methods used by the respondents as seen in table 6. Majority of both men and women did not use any method (P=0.870) and when they use, they most commonly used method is the condom (P=0.944). Also, majority of both men and women did not discuss the methods with their spouses (P=0.944)

DISCUSSION

Awareness about family planning was very high (almost 100%) among both men and women. It shows that both male and female residents of the area have been adequately sensitized. This is higher than the finding of Adinma and Nwosu (2005) in Nnewi, Nigeria in which 76% respondents were aware of family planning. It is also higher than the 67.1% reported by Oye- Adeniran et al., (2006) in another Nigerian study. The awareness level of family planning by Obisesan et al (1998) in Ibadan South-West, Nigeria was 94.3%. However, the sources of information about family planning differ significantly with most men hearing about it from radio jingles and most women hearing about it in the hospital. The difference could be attributed to ante-natal clinic attendance and generally better health-seeking behaviour by women. In a study by Utoo et al., (2010), women similarly reported that hospitals formed their major source of information about family planning. Arma-Ansa (2018) also reported that the major source of family planning information by men was the media. In contrast, Ikechebelu et al., (2005) reported that media was the commonest source of information among women.

The perception that family planning is the responsibility of both husband and wife was similar among the men and women. This perception will increase the involvement of men, thereby improving acceptability of family planning by the women. It will also improve the involvement of men in other reproductive health issues. The finding however contrasts with that of Ademola et al (2014) that birth control was largely perceived woman's activity.

The attitudes of the men and women to family planning were also comparable. They both found that traditional family planning to be acceptable. This will enable couples to have access to a variety of family planning options. They both agreed the use of family planning is good for a healthy family. The implication of this is improved maternal and child health as well as general well-being of the family (WHO, 2020; Faundes, 2012). They both agreed that male family planning methods are equally as effective as female methods and they both agreed that men should use family planning. This will improve societal acceptance of various methods of family planning by both sexes.

The use of family planning was poor among both men and women. A comparable proportion of men (45.9%) and women (46.2%) had used some form of contraception. This implies poor utilization by both sexes. This means the awareness and knowledge of the couples were translated into use. Similar reports were made by Macellina et al., (2010). Nte at al (2009) reported that about 33.5% of married man in Port Harcourt, Nigeria had used had used some form of contraception. Olubodun et al (2020) reported 47.2% of women in two rural communities in Ogun State, South-West Nigeria, had ever used family planning. There is need to sensitize both men and women to increase the uptake and usage of family planning in our environment.

Most respondents from both sexes did not discuss the methods with their spouses. This is in contrast to the finding by Adugnaw et al (2011) that majority of the couples studied had discussed family planning with their spouses. Also, couples rarely attend family planning clinics together. The finding that men rarely accompanied their wives to hospital for family planning agrees with that of Ademola et al., (2014). Communication among couples is encouraged as it will increase the acceptance of family planning and other reproductive health practices. Couple-based family planning counselling has also been shown to improve male involvement and contraceptive practice among couples (Tilahun et al, 2015).

Majority of both men and women did not use any method. The unmet need for contraception is a concern for both men and women. The commonest reason for not using any method by women was health concerns (Moreira et al, 2019). Among users however, the commonest method used by both men and women was the male condom. Our finding contrasts with that from a study in South-West Nigeria which showed that the commonest contraceptive used by married women was the intrauterine device (Adeyemi et al, 2009). Konje at al (1998) also showed that intrauterine device is the commonest method used by Nigerian women. The male condom is the most commonly reversible contraceptive used by men (Abbe at al, 2020). The contraceptive options male are largely limited to the male condom and vasectomy. More methods are needed to take care of the unmet need for men (Reynolds-Wright et al, 2020).

CONCLUSION

Both men and women have good knowledge of family planning. Sources of information however differ significantly, being radio jingles for men and hospital visits for women. Both show poor uptake with majority not using any method. Spousal communication among couples and male involvement are poor. The male condom is the commonest method used by both men and women. We recommend policies that target the couple in family planning programs to encourage male participation as well as increase the uptake by both men and women.

Table 1 Demographic characteristics of the married men and their spouses

Demographic Characteristics	Men	Women	$\chi 2$	P-value
Age Group (yrs)				
≤30	12(19.4%)	6 (9.2%)	11.372	0.023
31–40	21(33.9%)	20(30.8%)		
41–50	18(29.0%)	33(50.8%)		
51–60	6 (9.7%)	6 (9.2%)		
≥61	5 (8.1%)	0 (8.0%)		

Total	62(100.0%)	65(100.0%)		
Level of Education				
No formal education	4 (6.5%)	9 (13.8%)	3.747	0.290
Primary	22(35.5%)	16(24.6%)		
Secondary	30(48.4%)	36(55.4%)		
Tertiary	6 (9.7%)	4 (6.2%)		
Total	62(100.0%)	65(100.0%)		
Occupation				
Farming	19(30.6%)	14(21.5%)	12.451	0.014
Trading/ Business	11(17.7%)	29(44.6%)		
Artisan/ Hand work	23(37.1%)	12(18.5%)		
Civil Servant	7 (11.3%)	7 (10.8%)		
Others	2 (3.2%)	3 (4.6%)		
Total	62(100.0%)	65(100.0%)		
How long have you been married (years)				
1–5	13(21.0%)	12(18.5%)	0.740	0.946
6–10	16(25.8%)	19(29.2%)		
11–15	13(21.0%)	14(21.5%)		
16–20	7 (11.3%)	5 (7.7%)		
Total	62(100.0%)	65(100.0%)		

Table 2 Knowledge of family planning

Knowledge of Family Planning	Men	Women	χ2	P-value
Have you heard about family planning?				
Definitely no	1 (1.6%)	0 (0.0%)	4.896	0.086
Probably yes	25(40.3%)	16(24.6%)		
Definitely yes	36(58.1%)	49(75.4%)		
Total	62(100.0%)	65(100.0%)		
If yes, how did you come about the knowledge of family planning?				
Hospital	16(26.2%)	45(69.2%)	24.589	0.000*
Radio	32(52.5%)	16(24.6%)		
Friends	6 (9.8%)	2 (3.1%)		
Television	6 (9.8%)	1 (1.5%)		
Others	1 (1.6%)	1 (1.5%)		
Total	62(100.0%)	65(100.0%)		

Table 3 Perception of married couples towards family planning

Perception	Men	Women	χ2	P-value
Whose responsibility is Family Planning?				
Husband and wife	45(73.8%)	47(72.3%)	0.151	0.927
Wife only	14(23.0%)	15(23.1%)		
Others	2 (3.3%)	3 (4.5%)		
Total	61(100.0%)	65(100.0%)		

Table 4 Attitude of married couples towards family planning

ITEMS	Men		Women		t-test	P-value
	Weighted Mean	Std dev	Weighted Mean	Std dev		
To what extent do you agree that family Planning is a woman's business	2.97	1.35	2.80	1.33	0.701	0.485
To what extent do you agree that traditionally family planning is acceptable	3.43	1.32	3.25	1.32	0.764	0.447
To what extent do you agree that the general use of Family Planning is good for a healthy family	4.16	1.08	3.95	1.37	0.949	0.344
To what extent do you agree that male Family Planning methods are equally as effective as female methods	3.69	1.12	3.55	1.40	0.593	0.554
To what extent do you agree that Men should take up the responsibility of using Family Planning	3.48	1.30	3.35	1.47	0.490	0.625

Table 5 Practice of family planning

Questions	Married Men		Married Women		t-test	P-value
	Weighted Mean	Std dev	Weighted Mean	Std dev		
To what extent do you use family planning?	2.02	1.10	2.00	1.12	0.083	0.934
To what extent do you discuss family planning with your partner?	2.41	1.37	2.51	1.24	0.421	0.675
To what extent do attend family planning clinics together?	1.72	1.17	1.77	1.07	0.240	0.811

Table 6 Methods of family planning used

Practice of Family Planning	Men	Women	χ2	P-value
Which of the following family planning methods have you used?				
None	33(54.1%)	35(53.8%)	1.830	0.870
Condom/ Barrier	14(23.0%)	14(21.5%)		
Withdrawal	4 (6.6%)	7 (10.8%)		
Periodic abstinence	5 (8.2%)	6 (9.2%)		
Oral pills	2 (3.3%)	2 (3.1%)		
Others	3 (4.9%)	1 (1.5%)		
Total	62(100.0%)	65(100.0%)		
Which of these methods of family planning have you ever discussed with your spouse?				
None	33(54.1%)	36(55.4%)	1.205	0.944
Condom/ Barrier	11(18.0%)	11(16.9%)		
Withdrawal	6 (9.8%)	6 (9.2%)		
Periodic abstinence	5 (8.2%)	7 (10.8%)		
Oral pills	4 (6.6%)	2 (3.1%)		
Others	2 (3.3%)	3 (4.6%)		

Conflict of interests: None declared
Source of funding: None

REFERENCES

1. Abbe C.R., Page S.T. and Thirumalai A. (2020). Male contraception. Yale Journal of Biology and Medicine 93(4): 603-613.
2. Adelekan A., Omoregie P. and Edoni E (2014). Male involvement in family planning: challenges and way forward. International Journal of Population Research. Article ID 416457 doi.org/10.1155/2014/416457.
3. Ademola A., Omoregie P., Edoni E. (2014). Male involvement in family planning, challenges and way forward. International Journal of Population research. 14(2): 172-176
4. Adeyemi A.S. and Adekanle D.A. (2009). Factors influencing the choice of contraceptives among the married women in Osogho, Wastern Nigeria. Nigerian Medical Practioner. 55(4). doi:10:4314/nmp/v55i4.45432.
5. Adinma J.I.B. and Nwosu B.O. (2005). Family planning knowledge and practice among Nigeria women attending an antenatal clinic. Adv contracept;11(4):335–344.
6. Adugnaw B., Sibhatu B., Alemayehu A., Sudhakar M., Alemayehu N and Kebede D. (2011). Men's knowledge and spousal communication modern family planing methods in Ethiopia. Africa journal of reproductive health 15(2): 4-24.
7. Armah-Ansah E.K. (2018). Perception of Family Planning Use among Married Men and Women in Anomabu Community. J Contracept Stud 3(3): 21
8. Duze M.C. and Mohammed I.Z. (2006). Male knowledge, attitudes, and family planning practices in northern Nigeria. African Journal of Reproductive Health. 10(3): 53-65.
9. Faundes A. Strategies for the prevention of unsafe abortion (2012). International Journal of Gynecology and Obstetrics. 119(51): 568-71.
10. Ikechebelu J.I., Joe-Ikechebelu N.N., and Obiajulu F.N (2005). Knowledge, attitude and practice of family planning among Igbo women of South-Eastern Nigeria. J Obstet gynaecol . ;25(8):792–795.
11. Karim S.I., Irfan F., Saad H., Alqhtani M., Alsharhan A., Alzhrani A. et al (2021). Men's knowledge, attitude, and barriers towards emergency contraception: A facility based study at King Saud University Medical City. PLoS ONE 16(4): e0249292.
12. Konje J.C., Oladini F., Otolorin E.O. and Ladipo O.O. (1998). Factors determining the choice of contraceptive methods at the Family Planning Clinic, University College Hospital, Ibadan, Nigeria. British Journal of Family Planning 24(3): 107-10.
13. Marcellina Y.I, Titilayo C.A., Kayoed T.I., Olusegun T.A., Olapeju A.E and Fumilola O. (2010). Male involvement in family planning Decision making in Ile Ife, Osun State, Nigeria. African journal of reproductive health 14(4):45-50
14. Moreira L.R., Ewerling F., Barros A.J.D. (2019). Reasons for nonuse of contraceptive methods by women with demand for contraception not satisfied:an assessment of low and middle-income countries using demographic and health surveys. Reproduction and Health. 16(148). doi.org/10.1186/s12978-019-0805-7.
15. Nte A.R., Odu N. and Enyindah C.E. (2009). Male involvement in family planning: women's perception. Nigerian Journal of Clinical Practice.12(3): 306-10.
16. Obisesan K.A., Adeyemo A.A. and Fakokunde B.O.(1998). Awareness and use of family planning methods among married women in Ibadan. Nigeria. East Afr Med

J;75(3):135–138.
17. Olaoye T., Akinade O., Ogunsanmi O. and Ayodele K.O. (2015). Male spouses' support of family planning (FP) Uptake by wives: the role of socio-biographical mediators. Journal of Health, Medicine and Nursing. 18: 86-96.
18. Oye-Adeniran B.A., Adewole I.F., Umoh A.V., Oladokun A., Gbadegesin A. and Ekanem E.E. (2006). Community based study of contraceptive behaviour in Nigeria. Afr J Rep Health 10(2):90–104.
19. Oyediran K.A., Ishola G.P. and Feyisetan B.J. (2002). Factors affecting ever-married men's contraceptive knowledge and use in Nigeria. Journal of Biosocial Science 34(4): 497-510.
20. Reynolds-Wright J.J. and Anderson R.A. (2020). Male contraception: where are we going and where have we been? BMJ Sexual and Reproductive Health. 45: 236-242.
21. Tilahun T., Coene G., Temmerman M. and Degomme O. (2015). Couple based family planning education: changes in male involvement and contraceptive use among married couples in Jumma Zone, Ethiopia. BMC Public Health 15(682). Do i.org/ 10.118 6/s 128 89- 015-2057-y.
22. Utoo B.T., Mutihir T.J. and Utoo, P.M.(2010). Knowledge, attitude and practice of family planning methods among women attending antenatal clinic in Jos North Central Nigeria. Niger J. Med.19(2) 214-218
23. World Health Organization (2020). World Health Organization / Fact sheets / Detail / Family planning / contraceptive methods.