

Assessment of Knowledge, Awareness, and Use of Family Planning Methods Among Residents in Iringa Municipality

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Abstract

A cross-sectional descriptive study was conducted in the Iringa Municipality with 100 women of childbearing age aged 18 to 45 years. Levels of knowledge and awareness of family planning methods were surveyed using a self-administered questionnaire. As a result, it was found that the majority of 94(94%) of the surveyed population said they were well-informed about family planning methods and had good attitudes and awareness of contraceptives. Of the methods presented, male condoms, injections, and implants were familiar and used by the majority of participants. Of the 100 participants, 85(85%) used modern family planning techniques and 71(83.5%) of them reported having used services at a health facility. However, the remaining 15(15%) of respondents indicated that they did not use family planning for religious and cultural reasons. Modern contraceptive technology is available, accessible, and proven to be used. Therefore, more education is needed for communities on the importance of using permanent modern strategies, including sterilization. Getting men involved is also important.

Keywords: Knowledge, Awareness, Family planning methods, Iringa Municipality

1. Introduction

Family planning refers to the information, means, and methods that allow individuals to decide if and when to have children. It also includes information about how to become pregnant when it is desirable, as well as the treatment of infertility (UNFPA 2018). Family planning deals with the reproductive health of the mother, having good enough delivery spacing, averting undesired pregnancies and abortions, and stopping sexually transmitted diseases, (HO, 2018). The proportion of married women currently using any family planning method increased from 13% in 1992 to 38% in 2015, and the use of modern methods increased from 6.6% to 32% over the same period. However, this percentage does not match the global average of 64%.

(MoHCDGEC, 2016). Tanzania is one of the Sub-Saharan countries characterized by a high fertility rate of 5.4 per woman (the United Republic of Tanzania and Micro International Inc., 2010; World Bank, 2010), compared with Kenya and Rwanda (4.6) per woman (Muhoza, Brekhuis, & Hooimeijer, 2014). Despite steady improvements in the availability of modern family planning methods in Tanzania, there are barriers to women's acceptance of them. These include a lack of some of the available and used methods, a limited number of family planning method providers and capabilities, little user education, especially about durable modern contraceptive methods, and social rejection. The fear of these methods includes the side effects that these methods may have on the user's health, husband resistance, preference for large families, and concerns that contraceptive use leads to extramarital affairs (Kabagenyi et al., 2014; URT, 2010; Cleland et al., 2006). Iringa Municipality experiences excessive birth rates and excessive initial costs (Municipal Improvement Report, 2012). Provision, expertise, and use of modern contraceptive methods is an essential factors in suppressing fertility in all societies (Browne & LaLumia, 2014). Its deficiency leads to excessive fertility and poor access to opportunities, including employment, leading to poverty (Browne & LaLumia, 2014).

Therefore, this study aimed at observing amongst different matters, the women's perceptions of the availability, fashionable understanding, and mindset of the society on the usage of current contraceptive strategies in Iringa Municipality, Tanzania.

2. Materials and Method

A cross-sectional descriptive study that involved hundred (100) randomly selected females of reproductive age in Iringa Municipality (Kihesa, Mashine Tatu, and Frelimo) was conducted. This means that every participant in this study had an equal chance and consideration to participate. Information on the use and response of family planning methods and supportive information on contraceptive use was provided. The study took six months from January 2022 to June 2022.

3. Data Analysis

The questionnaire was used by investigators to interview selected study participants. The questionnaire included socio-demographic information regarding age, education, marital status, and occupation, as well as questions regarding knowledge, perceptions, and use of family planning methods. Obtained data were coded, entered, and analyzed using the Epi Info 7.1.3 program (CDC, Atlanta, GA, USA). Data were presented as tables and graphs according to their relevance.

4. Results Socio-demographic Characteristics of Respondents

A total of 100 females of reproductive ages as respondents were included in the study. Forty-five (45%) of the participants were aged between 23 and 27 years and fewer than 3(3%) were above 37 years. The majority, 45(45%) had primary education, 39(39%) had secondary education 14(14%) reached the tertiary level and fewer than 2(2%) had no education. Based on marital status majority of respondents 45(45%) were married and the rest were single 27(27%) widowed 8(8%) and divorced 20(20%) table 1.

Table 1. Socio-demographic characteristics of female participants involved in this survey

Socio-demographic characteristics	Number (N=100)	Percent (%)
Age groups (n=100)		
18-22	12	12%
23-27	45	45%
28-32	25	25%
33-37	15	15%
>37	3	3%
Residence (n=100)		
Kihesa	55	55%
Frelimo	40	40%
Machine tatu	5	5%
Religion(n=100)		
Muslim	10	10%
Protestant	25	25%
Catholic	61	61%
Others	4	4%
Marital status(n=100)		
Single	27	27%
Married	45	45%
Divorced	20	20%
Widowed	8	8%

Education level(n=100)

None	2	2%
Primary	45	45%
Secondary	39	39%
Tertiary	14	14%

Occupation(n=100)

Employed	12	12%
Unemployed	25	25%
Student	12	12%
housewives	51	51%

Sources of information on family planning services among respondents were health worker advice 21(24.7%), radio 19(22.3%), reading newspapers 15(17.7%), television 11(12.9%), friends 14 (16.5%), and others sources 5 (5.9%).

Table 2. Knowledge and use of family planning methods among female representatives in Iringa Municipality

Ever heard of FP and knowledge(n=100)

Yes	94	94%
No	6	6%

FP usage (n=100)

users	85	85%
none users	15	15%

Methods used (n=85)

Intrauterine device (IUD)	2	2.3%
condoms	29	34.1%
injections	20	23.5%
pills	18	21.2%
others	16	18.8%

Source of information on FP(n=85)

Health worker advice	21	24.7%
From friend	14	16.5%
Radio	20	23.5%
Television	11	16.5%
Newspaper	15	17.6%
others	4	4.7%

Accessing FP (n=85)

Health care facility	71	83.5%
Pharmacy	0	0%
FP Clinic	14	16.5%
NGOs	0	0%
Other	0	0%

Reason for none users(n=15)

Spouses do not agree	2	13.4%
It has bad effects	5	33.3%
Religious unacceptable	3	20%
Cultural reasons	4	26.7%
Others	1	6.7%

More than three quarters 94(94%) of the participated women in this study had a level of understanding and awareness of family planning services compared to 6(6%) who had not (table 2).

Table 3. Attitude on family planning method among women in Iringa Municipality

Variable	Number	Percent (%)
Do you discuss FP with your spouse(n=100)		
Yes	87	87%
No	13	13%

Who makes the final decision
on FP and the number of
children(n=100)

I do	28	28%
My spouse	12	12%
My spouse and I	60	60%

Is there cultural or religious
belief on FP methods(n=100)

Yes	34	34%
No	27	27%
I do not know	39	39%

4.1 Attitude toward Family Planning Services

Out of 100 respondents, the majority of them 87(87%) had positive attitudes towards family planning methods, and the right place for them to access family planning services is a healthcare facility 71(83.5%) and 14(16.5%) FP Clinic. The majority discussed family planning matters with their spouses and were able to decide together on matters related to family planning usage. Additionally, there were fewer reported attitudes associated with religious or cultural aspects only. Reasons mentioned against the use of family planning services among females were spouse does not agree 2(6.7%), bad side effects 5(33.3%), religious unacceptable 3(20%), culture reasons 4(26.7%), and not at risk 2(6.7%).

4.2 Knowledge of Family Planning Services

Having examined the knowledge, awareness, and attitudes on family planning techniques methods and their accessibility, the study further indicated the rate of use of modern contraceptive methods. As indicated in (table 2). Out of 85(85%) women who were using modern contraceptive methods 29(34.1%) were using condoms, 20(23.5%) injectable, 18(21.2%) pills, 16(18.8%) others and the remaining 2(2.3%) were intrauterine devices

5. Discussion

More than two-thirds of the respondents in this survey had a working knowledge of family planning services, and the majority correctly identified two to three modern contraceptive methods. Primary education influences employment, with the majority of respondents 51(51%) being housewives compared to 12(12%) of them having informal education. Lack of education and low educational attainment were associated with poor knowledge of family planning services. Low-educated respondents were fairly ill-informed compared to those highly educated. Also, those with access to information are reported to be more knowledgeable about family planning than those without access to information.

Additionally, the most popular sources of information about family planning services among study participants were radio and advice from health care providers.

These observations are consistent with national surveys that considered high-level knowledge and mass media as the primary sources of information. (Kamala & Aboud, 2006; TDHS, 2010). The most important reason for the poor use of family planning techniques in this study was related to educational level. People with little or no education are less knowledgeable than those with education. Similar cases have been reported in numerous studies elsewhere (Toroitich-Ruto, 2004; Oni et al., 2005; Rondini & Krug, 2009; Nworah et al., 2009; Paluku et al., 2010).

In this study majority of respondents feel that health facilities are a better place to access family planning services than other non-health facilities. Other studies have shown that the delivery of family planning services in healthcare settings can be a barrier to uptake (Guiella, 2007; Okech et al., 2011). There were no problems accessing services among respondents who used family planning. The reasons cited were high availability and no need to travel long distances for service. Additionally, respondents said they use these services for free during working hours. This was also reported by Williamson et al. (2009). In Mali, women argued that access to modern methods was not a problem. However, in our current research, users reported that they encountered various problems while accessing the service. The main challenges reported were the lack of family planning service providers and the limited choice of family planning methods. This study further examined the use of modern contraceptive methods. Injections, implants, and condoms were preferred to the pill and IUD due to their higher contraceptive accuracy. Injections and implants also reduced the number of frequent hospital visits compared to other methods. Injections and implants, which are more effective contraceptives, are preferred to pills and condoms. For injections and implants, reduced clinics for services compared to other methods. Due to its irreversible nature, sterilization was least preferred when those who chose it no longer needed children. This result is consistent with that of Tsedeke et al. (2006) Ethiopia and Aryeete et al. (2010) that found that injections, pills, and male condoms were commonly used methods in Ghana. There was a younger reproductive age (23-27 years) that used more modern contraceptive methods than other age groups. The results are in line with Malalu et al. (2014), Okech, Wawire, and Mburu (2011) who reported that young adult women in Kenya used contraception more frequently than older adult women.

6. Conclusion and Recommendations

Modern contraceptive methods are available, accessible, used in the Iringa community, well-informed, and the majority are familiar with family planning laws. This method is available in hospitals, health centers, and pharmacies. Based on the availability and methods used, research concludes that family planning methods are helpful in family planning when used appropriately. However, communities need to be more educated about the importance of using permanent and modern methods such as sterilization. Getting men involved is important. Similarly, expanding family planning services and training family planning service providers may be viable solutions to improve knowledge and awareness of family planning methods.

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Competing interests: The authors declare that there is no competing interest.

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