

ORIGINAL RESEARCH ARTICLE

ASSESSING THE KNOWLEDGE, ATTITUDE AND PRACTICE OF FAMILY PLANNING AMONG MALE POPULATION IN INARUWA MUNICIPALITY OF EASTERN NEPAL

Samyog Uprety<sup>1,\*</sup>, Khem Raj Sharma<sup>1</sup>, Masum Paudel<sup>2</sup>, Dharanidhar Baral<sup>1</sup>, Anup Ghimire<sup>1</sup>

<sup>1</sup>School of Public Health and Community Medicine, BPKIHS, Dharan, Nepal

<sup>2</sup>Department of General practices and Emergency Medicine, BPKIHS, Dharan, Nepal

Received: 19 Sep, 2020

Accepted: 5 Mar, 2021

Published: 25 Mar, 2021

**Key words:** Eastern Nepal; Family planning; Work load.

\*Correspondence to: Samyog Uprety, School of Public Health and Community Medicine, B.P. Koirala Institute of Health Sciences, Dharan, Nepal.  
Email: [samyog.uprety@bпкиhs.edu](mailto:samyog.uprety@bпкиhs.edu)

Citation

Uprety S, Sharma KR, Paudel M, Baral D, Ghimire A. Assessing the knowledge, attitude and practice of family planning among male population in Inaruwa Municipality of Eastern Nepal. Journal of Chitwan Medical College. 2021;11(35):95-8.



Peer Reviewed

ABSTRACT

**Background:** Family planning allows individuals and couples to anticipate and attain their desired number of children, spacing and timing of their births. It is achieved through use of contraceptive methods. A man's perspective on the family planning methods and services is essential on his family health. The study aimed to know about knowledge, attitude and practice of family planning methods in male (Rickshaw puller) of Eastern Nepal and to know their reasons for not using the family planning.

**Methods:** A descriptive cross-sectional study was done in Inaruwa municipality. Total of 400 male rickshaw puller samples were taken. Knowledge, attitude and practice on contraceptives were evaluated with the help of a predesigned questionnaire. Descriptive analysis was done by using SPSS 11.5 software to obtain frequencies and percentages.

**Results:** Out of 400 interviewed, 366 were interviewed with 92% response rate, the mean age was 36.54 years, and 92.7% said they heard about Family planning method. Health worker was the main Source of family planning information. Regarding the attitude of the Male respondents, 83.1% supported the concept of family planning; only 33.9% said they had used a male contraceptive, 46.7% of the respondents said the males didn't practice the family planning methods on themselves because of the work load.

**Conclusions:** Majority of the respondents knew about family planning methods but only a few agreed to have used them. The main reason for men lagging behind could be that the burden of work due to which contraception in a family is taken up by females.

INTRODUCTION

Contraception is one of the adjacent determinants of fertility and the most important interpreter of fertility transition. The determinants of fertility in developing societies are influenced by the demand for a certain number of children, their survival and assessment of their survival. Within the context of these factors, people evaluate availability and cost of fertility regulating mechanisms.<sup>1,2</sup> As fertility trends decline it has significant role in decreasing infant, child, and maternal mortality. Women spend decreasing proportions of their lifetimes giving birth and caring for young children.<sup>3</sup>

Since the 1994 International Conference on Population and Development (ICPD), and the 1995 UN World Conference on Women, interest in men's involvement in reproductive health has increased. There has also been a shift in objectives of male participation and concerns, from increasing contraceptive use and achieving demographic goals to achieving gender equality and fulfilling various reproductive responsibilities.<sup>4,5</sup>

Male involvement helps not only in accepting a contraceptive but also in its effective use and continuation.<sup>5</sup> Spousal communication on contraception and reproductive goals

suggests that the couple has an egalitarian relationship.<sup>6</sup> Studies have shown that couples who discuss the number of children they desire or the use of family planning are more likely to use a contraceptive and achieve their reproductive goals.<sup>3,6</sup> The study aimed to know about knowledge, attitude and practice of family planning methods in male (Rickshaw puller) of Eastern Nepal and to know their reasons for not using the family planning.

METHODS

A cross-sectional study was conducted in Inaruwa Municipality among male rickshaw puller. According to their union organization, there were approximately 400 rickshaw pullers registered in their union. So, census method was used for sample size calculation. The semi-structured questionnaire was used as tools for data collection. The questionnaire was developed in English which was translated in local language and interviewed. Prior to interview, questionnaire was pretested in Jhumka Municipality. The questions included socio-demographic variables such as caste, age, religion, type of family, education status, level of education, marital status, etc. Variables regarding the knowledge such as knowledge about family planning methods, source of information, etc, attitude such as support the concept of family

planning, preference to permanent sterilization, appropriate age of marriage etc. and practice such as use of contraceptive, desired level of child spacing etc. of the family planning methods were included. Inform written consent was taken from all the study subjects. Confidentiality was maintained and those who did not give consent were excluded. To assure data quality, the questionnaire was pre-tested before the commencement of the research. Every day, the collected data were entered in Microsoft Excel 2007 and analyzed using SPSS 11.5. Descriptive Statistics as percentage, mean, standard deviation, were calculated and for inferior statistics chi-square test was used to see association between contraception use in Future after desire gender.

## RESULTS

In our study we try to find the knowledge, attitude and practice of family planning among male rickshaw pullers. Total sample size was 400, but 366 were interviewed with 92% response rate. Majority were belonged to 31-45age group with average age of 36.42 years (SD= ±10.791) of which 81.4% were Hindu. Most of the respondents had a joint family (61.5%). About92% of them were married. The mean age of marriage was found to be 20.31 years (SD= ±2.661). Majority were illiterate (Table 1), and they were married for more than 15 years. Mean age at marriage was 20.31 yrs withSD±2.661 and majority had more than one child.

**Table 1: Socio-demographic characteristics of respondents (n=366)**

Variables	Frequency (%)
Age	
≤30yrs	139(38)
31-45yrs	159(43.4)
>45yrs	68(18.6)
Mean age(yrs) -36.42±10.79	
Religion	
Hindu	298(81.4)
Muslim	68(18.6)
Type of family	
Nuclear	141(38.5)
Joint	225(61.5)
Income status	
<1.9 \$	327(89.3)
>1.9\$	39(10.7)
Literacy status of respondent	
Literate	86(23.5)
Illiterate	280(76.5)
Wife Literacy status	
Literate	31(9.2)
Illiterate	305(90.8)
Marital status	
Married	336(91.8)
Single	30(8.2)
Year of Marriage	
≤15 yrs	161(47.9)
>15yrs	175(52.1)
Age at Marriage	
≤20 yrs	214(63.7)
>20 yrs	122(36.3)

Mean age (yrs)-20.31±2.661	
No of Children	
≤1	80(24.5)
>1	246(75.5)
Sex of children	
Male child	301(89.6)
Female	271(80.7)

About enquiring the knowledge about Family planning (Table 2), our study showed that majority had heard about family planning method and its type, source of information were health workers and friend circles, about 77% had had heard about condoms, about 58% knew about male contraception. When we asked the about advantage and disadvantages of family planning methods most of them expressed that it helps to prevent birth control and prevent from STDs. most of them told that it is uncomfortable to use as disadvantages of male contraception.

**Table 2: Knowledge of family planning among respondents (n=366)**

Variables	Frequency (%)
Heard about Family Planning	
Yes	337 (92.1)
No	29 (7.9)
Source of information*	
Health workers	134 (36.6)
Friends	128 (35.0)
Radio	57 (15.6)
Television	23 (6.3)
Family members	10 (2.7)
Others	9 (2.5)
Do you know Type of Family planning?	
Yes	337 (92.1)
No	29 (7.9)
If Yes which type you know*	
Condoms	282 (77.0)
Permanent methods	275 (75.1)
Pills	210 (57.4)
Injection Depo	199 (54.4)
Where you get Family planning service? *	
Hospital	242 (66.1)
Medical shop	68 (18.6)
Health post	55 (15.0)
Do you know about male contraception?	
Yes	212 (57.9)
No	154 (42.1)
If yes	
The advantages*	
Birth control	189 (51.6)
Prevent from STD's	122 (33.3)
The Disadvantages*	
Don't know	27 (7.4)
Allergy	44 (12.0)
Uncomfortable to use	133 (36.3)

\*multiple response, ≠100%

Regarding the attitude of the male respondents (Table 3), 83.1% supported the concept of family planning About 49% of the

respondents expressed that the males didn't practice the family planning methods on themselves because of the work load, 79.5% of them recommended family planning methods to other people. On the practice side the respondents, only about 34% had ever used family planning methods. When we asked about the methods used by their couples, about 35% answered most of their couple had minilab operation. About 34% expressed that they send money to buy contraception methods.

**Table 3: Attitude and practices of family planning among respondents (n=366)**

Variables	Frequency (%)
Support concepts of family planning	
Yes	304 (83.1)
No	62 (16.9)
Do you discuss of Family planning methods with your wife?	
Yes	291 (79.5)
No	75 (20.5)
Reason for non- accepting family planning method by male population?	
Due to work load	178 (48.6)
Lack of knowledge about family planning	67 (28.3)
Hesitation	48 (13.1)
Felling of weakness if used	47 (12.8)
Don't like to use	22 (6.0)
Do you recommend your friends to use family planning methods?	
Yes	291 (79.5)
No	73 (20.5)
Decision of family planning methods?	
Both	273 (74.6)
Husband	74 (20.2)
Wife	19 (5.2)
Ever used family planning methods?	
Yes	124 (33.9)
No	242 (66.1)
Current Using family planning methods	
Yes	35 (9.6)
No	331 (90.4)
If No,	
is your wife using family planning methods	
Yes	184 (85.8)
No	147 (14.2)
Which methods she is using	
Oral Contraception pills	7 (2.2)
Depo	66 (21.0)
IUCD	2 (0.6)
MINI Lab	109 (34.7)
Do you spend any money to buy Family planning methods items	
It is Provided free	243 (66.3)
Yes about 100 rupees in one months	123 (33.6)

Table 4 showed the association between desire number of children and plan to use of contraception, which showed 38.4%

will be using family planning methods in near future after having both gender children, 38.4% will never use anyfamily planning methods in near future. It was found that 15.7% will be using family planning methods in near future after male child and 29.5% will be using family planning methods after female child. It was found that desire of male child has significantly difference to use contraception use rather than female child.

**Table 4: Association between contraception use in future after desire gender**

After Male Child	After Female Child		Total	p-value
	Yes	No		
Yes	43 (38.4%)	8(15.7%)	51(45.5%)	<0.001
No	18(29.5%)	43(38.4%)	61(54.5%)	
Total	61(54.5%)	51(45.5%)	112((100%))	

## DISCUSSION

Family planning is a part of the lifestyle of couples that pertains to planning their family size, the time and occurrence of childbirth and prevention of unwanted pregnancies. Contraceptive methods and services are mainly focus on women; men are normally the primary decision makers on family size and their partner's use of family planning methods.<sup>7,9</sup>

There was an active involvement of the health workers in these areas (Inaruwa and Jhumka) such that 4 out of 10 respondents came to know about family planning through health workers. About 92.7% of the total respondents interviewed knew about family planning out of which 60.3% of the respondents knew how to use a male contraceptive, study from Ethiopia<sup>10</sup> and Zimbabwe<sup>11</sup> showed similar finding to our studies. In context to BurkinFaso<sup>12</sup>79% of the respondents knew about family planning and used these methods mostly for birth spacing purpose rather than birth control, 90% recognized at least one method of family planning and 2/3 have heard about condom out of which half the men did know enough about how to use contraceptive. Also in Agra<sup>5</sup> less than 50% knew how to use male contraceptives. This revealed that majority of the population interviewed had knowledge of family planning despite the high levels of illiteracy thus supporting the fact that health workers have a major role in spreading the message of family planning even in low socio-economic strata of Inaruwa and Jhumka.

Majority of the people interviewed in our study who used male contraceptives, they expressed that it is used for birth control. Similar studies in male adolescents<sup>13</sup> revealed that most of them used male contraceptives to prevent unwanted pregnancies and very few knew about venereal diseases.

In our study, 83% of the respondents supported and approved the concept of family planning where as in Zimbabwe<sup>11</sup> it was found to be 83.5% and 99% in Gaza.<sup>14</sup> Also 80% of them approved discussion about family planning with their partners which is more than that in Zimbabwe<sup>11</sup> where 57% of the respondents discussed with their partners reflecting better relations and

understanding among the couples on the concerns of family planning in our study area.

Out of 366 of the respondents interviewed 64.8% suggested that both husband and wife should decide about family planning. Similar study in Zimbabwe<sup>11</sup> revealed 48.3% of the respondents said that male must decide about family planning methods to be used.

In our study, 33.9% of the respondents have used male contraceptives in their lifetime which is still lower than that in Zimbabwe<sup>11</sup> 80.6% and greater than that in Burkina Faso<sup>12</sup> which is 19%. In our study we found that about 9.6% of the respondents are currently using male contraceptive methods which is quite low as compared to study done in Agra<sup>5</sup>, Makwanpur<sup>15</sup> and Ethiopia<sup>10</sup> but slightly higher than that in Burkina faso study.<sup>12</sup>

In Inaruwa and Jhumka 35% of the wives of the respondents have already done sterilization and 80.9% of the respondents preferred for permanent sterilization which is comparatively better in comparison to results of similar study conducted in Makwanpur<sup>15</sup> where 69.6% had undergone vasectomy and 86.8% of their partners used contraceptives.

In our findings of the research strongly reflect that despite the presence of adequate knowledge and positive attitude towards male contraception there is minimal use of male contraception. Reason for non- accepting family planning method by male population was due to work load, feeling of weakness if used. It was also found that majority of the respondents associated the use of condoms with practice of paid sex which could be a major source of information bias about use of condom in this research.

In similar studies in Pakistan 16, the reasons for lesser use of

male contraceptives were fear of side effects like causation of impotence, backache, headache and infection by condoms and vasectomy. Having both gender child (male & female) will i.e. 38.4% be using any Family Planning methods in near future. A study done in Nepal, 17 showed that a strong propensity to have at least 1 or 2 sons among Nepalese men although they express not wanting to have more children.

## CONCLUSION

It can be concluded that although almost all respondents knew about at least one contraceptive method, and there was strong association between knowledge and the use of contraceptive methods.

## ACKNOWLEDGEMENT

This Research study was not an outcome of a single day or the product of a single mind. It has been completed with the suggestions, guidance and help of many people. First of all, we wish to express our sincere gratitude to School of Public Health and Community Medicine, B.P. Koirala Institute of Health Sciences for providing us an opportunity to carry out this research study. And students MBBS batch 2010 (Abhinay Choybay, Ashish Kumar, Dipendra Rai, Nisij Shrestha, Prajwal Dahal, Sharjeel Shamsi, Swarup Sharma Rijal, Tushar Jha, Rajendra Basnet, Ujjwal Das, Vijay Deo) and all the respondents that their kind cooperation and willingness to participate in the study. Finally, we would like to thank all who have directly or indirectly contributed to bring up this research study in this form.

**CONFLICT OF INTEREST:** None

**FINANCIAL DISCLOSURE:** None

## REFERENCES:

1. United Nations. World Population Policies 2007 [Internet]. 2007 [cited 11 May 2018]. Available from: [http://www.un.org/esa/population/publications/wp2007/Publication\\_introduction.pdf](http://www.un.org/esa/population/publications/wp2007/Publication_introduction.pdf).
2. Bulatao RA, Lee RD. Determinants of Fertility in Developing Countries: Fertility regulation and institutional influences. 2nd ed. Academic Press; 1983. 846 p.
3. World Bank. Effective Family planning programs [internet]. 1993 [cited 11 May 2018]. Available from: <https://elibrary.worldbank.org/doi/abs/10.1596/0-8213-2305-9>
4. Oyediran KA, Ishola GP, Feyisetan BJ. Factors affecting ever-married men's contraceptive knowledge and use in Nigeria. *J Biosoc Sci.* 2002; 34(4):497-510. [DOI]
5. Khan ME, Patel BC. Male involvement in family planning: a KAPB study of Agra District. The Population Council, India. Churchgate: SNTD, June 1997
6. Lalla T. Male involvement in family planning: a review of the literature and selected program initiatives in Africa. 1996: 2-3.
7. World Health Organization. Programming for male involvement in reproductive health [Internet]. 2002 [cited 11 May 2018]. Available from: [https://www.who.int/reproductivehealth/publications/general/WHO\\_RHR\\_02\\_3/en/](https://www.who.int/reproductivehealth/publications/general/WHO_RHR_02_3/en/)
8. Oyediran KA, Isiugo-Abanihe UC. Husband-wife communication and couple's fertility desires among the Yoruba of Nigeria. *African Population Studies.* 2002; 17(2): 61-80. [LINK]
9. Paz Soldan VA. How family planning ideas are spread within social groups in rural Malawi. *Studies in family planning.* 2004 Dec;35(4):275-90. [DOI]
10. Bayray A. Assessment of male involvement in family planning use among men in south eastern zone of Tigray, Ethiopia. *Scholarly Journal of Medicine.* 2012; 2(2): 1-10. [LINK]
11. Mbizvo MT, Adamchak DJ. family planning knowledge, attitudes, and practices of men in Zimbabwe. *Stud Fam Plann.* 1991;22(1):31-8. [DOI]
12. McGinn T, Bamba A, Balma M. Male knowledge, use and attitudes regarding family planning in Burkina Faso. *International Family Planning Perspectives.* 1989; 15(3): 84-7. [DOI]
13. Finkel ML, Finkel DJ. Sexual and Contraceptive Knowledge, Attitudes and Behavior of Male Adolescents. *Fam Plann Perspect.* 1975; 7(6):256-60. [PMID]
14. Donati S, Hamam R, Medda E. Family planning KAP survey in Gaza. *Soc Sci Med.* 2000; 50(6): 841-9. [DOI]
15. Pandey S, Karki S, Pradhan A. Practice of contraceptives. *Journal of Institute of Medicine.* 2009;31(3):3-9. [DOI]
16. Nishtar N, Sami N, Faruqi A, Khowaja S, Ul-Hasnain F. Myths and fallacies about male contraceptive methods: a qualitative study amongst married youth in slums of Karachi, Pakistan. *Glob J Health Sci.* 2013; 5(2): 84-93. [DOI]
17. Paudel YR, Acharya K. Fertility limiting intention and contraceptive use among currently married men in Nepal: evidence from Nepal Demographic and Health Survey 2016. *BioMed Research international.* 2018;2018: Article ID 5970705. [DOI]