

Awareness of modern contraceptives use and Family Planning Methods among Catholic Families in Hoima Diocese, Uganda

Rose Kyaligonza
Bibianna M. Ngundo
Johnson Mavole

ABSTRACT

This study examines the level of awareness of modern contraceptives use and family planning methods among Catholics of Hoima diocese in Uganda. The study is grounded on the Protection Motivation Theory and it adopts survey research design. Data are collected from 406 respondents mainly by use of questionnaire and interview guide. Quantitative data are analysed using descriptive statistical methods, such as frequency and percentage with the aid of Statistical Package for Social Sciences (SPSS) version 20. Chi-square is used to test the only hypothesis formulated for the study. The findings reveal that majority of the respondents were fully aware of contraceptives use. It is also found that awareness of contraceptives use influences Catholic family values. The study concludes that awareness of modern contraceptives use has negatively influenced Christian family values. It therefore advises that Church leaders should sensitize people on the Catholic teaching on contraception and on the Catholic family values which they must uphold.

Keywords: *Awareness, Modern Contraceptives, Family Values*

INTRODUCTION

Contraception is an intentional action against conception as a result of performing sexual intercourse in order to render infertile an act that could be fertile (Ashley, deBlois and O'Rourke, 2006). It is therefore an action which deliberately prevents conception or implantation from taking place. It can therefore be deduced from the foregoing that contraceptives are those devices or means through which conception is prevented.

Rose Kyaligonza is a Lecturer in the Faculty of Social Sciences and Communication, St. Augustine University of Tanzania, Mwanza, Tanzania. Bibianna M. Ngundo and Johnson Mavole are Lecturers in the Faculty of Arts and Social Sciences, The Catholic University of Eastern Africa, Nairobi, Kenya. E-mail: abwoolirosek@gmail.com, nbibiana@cuea.edu, johnsonzau@yahoo.com

Wills (2000) notes that, from time immemorial, women and men have always desired to decide when and whether to get a child or not and for this reason family planning is promoted to enable individuals to space and limit childbirth. Tamale (2016) notes that prior to the invention of modern contraceptive devices, Africans used less effective methods of fertility control. For example, they relied on breastfeeding which was used to suppress fertility, *coitus interruptus* or the withdrawal method, and they also used plants which contained both contraceptive and abortifacient properties. Tamale (2016) adds that, Africans were very aware of the benefit of child spacing to maternal and infant health and for this reason they tried to employ various methods to prevent conception in order to enhance child spacing. In agreement with Tamale, Walfe (1978) points out some of the methods which Africans used to prevent conception to include herbal portions taken orally, prolonged breastfeeding, *coitus interruptus* and polygamy. Sewani-Rusike (2010) also describes the use of thirty one species belonging to seventeen families for anti-fertility purposes which were used in Zimbabwe. They include: soap brush, dwarf marigold, sausage tree, castor oil plant among others. This shows how Africans treasured child spacing but with simple and less harmful methods of contraception. Contraceptives have, therefore, been used in many forms for many years throughout the history of man (Wills, 2000). Hence, the study aims at examining the level of awareness of modern contraceptives use and family planning methods among Catholics families of Hoima Diocese in Uganda. Additionally, it seeks to determine whether there was an association between certain factors such as sharing with friends as a way of creating awareness of modern contraceptives use and affecting sacredness of sex as a Christian family value. A comprehensive hypothesis was formulated to guide the study.

H₀1: Modern contraceptives awareness has no significant relationship with Christian family values.

METHOD

The study adopted survey research design to examine the extent of awareness of contraceptives use among Catholic families in Hoima Diocese in Bunyoro Kitara Kingdom, Uganda. Hoima Diocese's size is 17,200km² (Businge, 2017). The population of Hoima Diocese is 1,962,821 out of which 724,748 are Catholic Christians, forming 47.9% according to The Uganda Catholic Secretariat (2013) as cited by Businge (2017). The target population in this study consisted of all the lay faithful (Laity), all the diocesan priests, catechists, medical practitioners, and heads of

the married couples within Hoima Diocese in Uganda. The sample size of the lay faithful who participated in the study was calculated using the formula by Cochran (1963) as cited by Glenn (1992).

$$n_0 = \frac{Z^2 Pq}{e^2}$$

Where n_0 = sample size

Z^2 = abscissa of the normal curve that cuts off an area at the tails (1-a equals the desired Confidence level, e.g. 95%)

e = the desired level of precision

P = estimated proportion of an attribute that is present in the population and

q = 1-P

Therefore,

$$n_0 = \frac{(1.96)^2 (0.5)(0.5)}{(0.05)^2} = 385$$

Step 2: Finite population correction for proportions

$$n_0 = \frac{n_0}{1 + \frac{n_0 - 1}{N}}$$

where n_0 = the adjusted sample size; N = population size, therefore,

$$n_0 = \frac{385}{1 + \frac{385 - 1}{724789}}$$

$$n_0 = \frac{385}{\frac{724789 + 384}{724789}} = \frac{385}{\frac{725173}{724789}}$$

$$n_0 = \frac{385}{1} \times \frac{724789}{725173} = \frac{279043765}{725173}$$

$$\therefore n_0 = 384.795$$

Using Cochran's formula, the sample size calculated was approximately 384 lay faithful from 7 out of 38 parishes. The researcher used stratified sampling to select 56 lay

faithful (28 male and 28 female) from each parish. The lay faithful's sample was therefore 392. Using purposive sampling 7 parish priests and 7 head catechists were also selected to participate in the study making a total of 406 respondents. Questionnaire, interview guides and Focus Group Discussions (FGDs) were used for data collection. The three sets of research instruments were used as a form of triangulation. Ary, Chester, Razavien and Sorensen (2006) argue that, the combination of methods results in better evidence, when the different methods are in agreement; there is corroboration. Denzin (1989) also argues that, by the use of several data collection methods, the researcher avoids deficiency that springs from using one method.

Questionnaire were used to collect quantitative data because they can be used with a large number of subjects or a large number of items (McMillan and Schumacher, 2010). Six lay faithful were purposively selected from each parish to participate in the study which made a total of 7 focus groups, that is, one group from each parish. These were purposively sampled with the aid of the parish priest and by use of snowball sampling. As Krueger (2002) recommends, focus group participants should be carefully recruited and should be five to ten people per group, however, six to eight people are preferred. In addition, interview guides were also used because of their high response rate and ability to be used with non-readers (McMillan and Schumacher, 2010). Graphs, tables, frequency count and percentages were used to analyse the data with the aid of Statistical Package for Social Sciences (SPSS) version 20. Chi-square statistics was used to test the null hypothesis formulated for the study.

RESULTS AND DISCUSSION

With regard to the demographic characteristics of the respondents majority (35.2%) of the lay faithful were in the age bracket 20 and 29 years, followed by those between 30 and 39 years who were 22.2%, those between 40 and 49 years were 20.4%, those of 50 and above years were 12.2% and the least were those of 19 years and below who were 10% (Research data, 2018). Age can influence the views of the respondents on contraceptives use. However, looking at the age group where most lay faithful respondents fall, the trend suggests that most of the active lay faithful are people from the middle generation.

In relation to the marital status it was indicated in the findings that the majority of the respondents (52.2%) were married, 40.7% were single, and 3.3% were divorced or separated while 3.7% were widowed (Research data, 2018). The higher number of the married respondents can be attributed to the value attached to marriage in the Catholic Church and among the Banyoro people. Marital status can influence the

responses given because the single, married, divorced or separated and the widowed hold different views on contraceptives use. Respondents were asked to specify if they had used contraceptives before or not and to indicate the methods of contraceptives they had ever used. The findings are presented in figures 1 and 2.

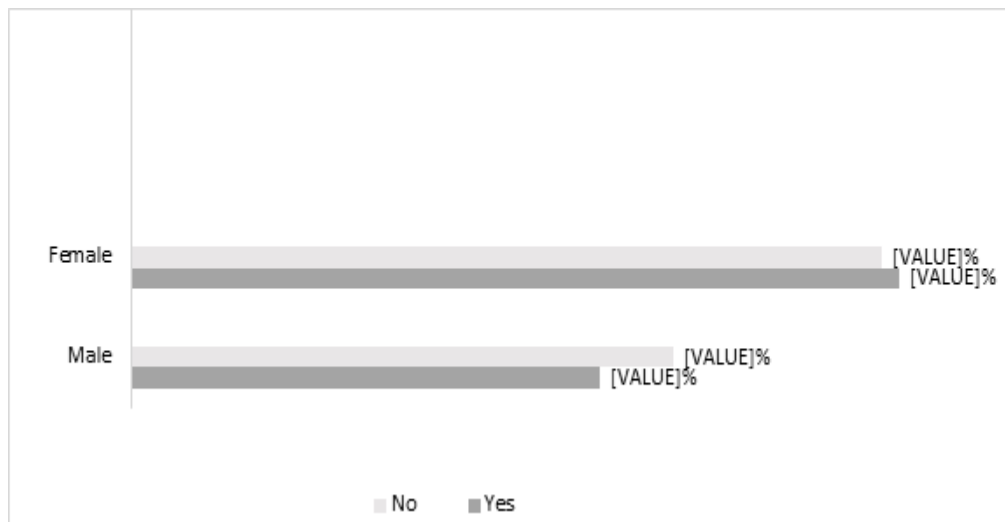


Figure 1: Contraceptives utilization by the Respondents

Figure 1 shows that 48.9% of the respondents of which 18.5% were males and 30.3% females indicated that they had ever used modern contraceptives. On the other hand, the majority of them (51.1%) of which 21.4% were males and 29.6% females indicated that they had never used any form of contraceptives. From these findings there is an indication that people are aware of modern contraceptives use and that they are using various methods of modern contraception for various purposes regardless of their religious background. The findings also show that more women use modern contraceptives than men (Research data, 2018). This could be due to the fact that most of the contraceptives methods used apart from condoms and vasectomy apply to women only (Research data, 2018). From these findings it came out clearly that the community is aware of modern contraception, many people have ever heard about contraception and that many people are using modern contraceptives both married and unmarried, young and adults.

These findings are in agreement with the findings of Muhindo, Nankumbi, Groves and Chenault (2015) which reveal that majority of the respondents (83.4%) are using hormonal contraceptives. Although the Catholic Church teaching is against modern contraception, many respondents tend to use contraceptives for various reasons such as avoiding unplanned pregnancies (Research data, 2018). Similarly, Balgir, Singh,

Kaur, Verma and Kaur (2013) in a study on contraceptive practices adopted by women attending an urban health centre in Punjab, the contraceptive prevalence was found to be 53.8%. This shows that awareness of contraceptives and the desire to space and plan children creates strong reasons for people to use whatever methods of modern contraceptives to avoid unintended pregnancies. In regards to the types of contraceptives used, respondents mentioned the types of modern contraceptives they had ever used as shown in figure 2 below.

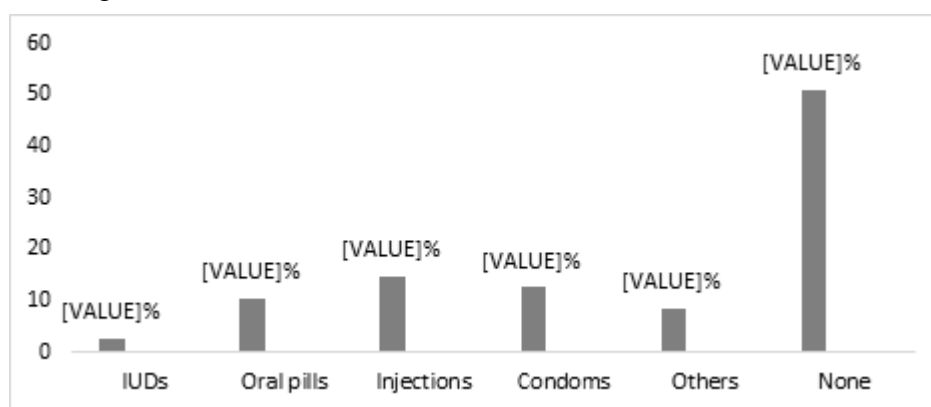


Figure 2: Responses on the types of contraceptives used

The analysis in figure 2 indicates that the majority of the respondents (51.1%) had never used any type of modern contraceptives while 48.9% had ever used various methods. From the findings, the majority of the respondents (14.8%) had used injections as a method of birth control followed by 12.6% who had used condoms and 10.4% had used oral pills. However, 8.5% of the respondents had used other types of contraceptive methods such as implants and tubal ligation as methods of family planning. The least used type was IUDs as mentioned by only 2.6% of the respondents. Most likely many people are not aware about IUDs or this method might be more expensive than other methods, hence, the reason for not being commonly used. Most likely, injections and condoms are easier to use compared to other methods, hence, people opt for them. Probably hormonal injections are more convenient and reliable since an injection lasts for three months before another dose can be given (Nambowa, 2014 and Kunhiyop, 2008). Lack of spousal consent and desire to be discreet were also found to be reasons some women opted for this method of contraception. These findings are similar to those of Nakayiza, Wamala and Kwagala (2014) which revealed that from a total of 642 women initially introduced to Depo-Provera (DMPA), 359 were still using the injection as a contraceptive method at the time of their evaluation. In line with this, the Health Belief Model (HBM) attempts to explain and predict health

behaviours by focusing on the attitudes and beliefs of individuals (Denison, 1996; Rosenstock, Strecher, and Becker, 1994). This means that awareness and perceived beliefs about modern contraceptive use by people will encourage and motivate them to use a specific method of contraception dependent on the benefits they perceive in that particular method (Denison, 1996; Rosenstock, Strecher and Becker, 1994).

In addition, it was necessary to find out which kind of media people obtained information about modern contraceptives. It was revealed that majority of the respondents (93.4%) had acquired knowledge of family planning through radio programmes, while 85.5% had acquired knowledge of family planning through medical practitioners. Friends was another source of information also add to their knowledge as indicated by 83.3%. On the other hand, 69.6% of the respondents got the information through newspapers, while 69.3% said it is from television that they got knowledge about modern contraceptives. The findings clearly show that the level of awareness of modern contraceptives use among the people of Hoima Diocese is quite high as there are many sources of information such as; radios, medical practitioners, friends, newspapers and television through which people get to know about contraceptives use.

These findings are in line with those of Kai-Wen (2011) who shows how knowledge about contraceptives was disseminated by mass media and social networks which resulted into women transforming their knowledge into behaviour. This shows that mass media are key sources that expose people to contraceptives, which later influences them to either use or not use of modern contraceptives. However, studies carried out by Hooja and Mital (2012); Lenjisa, Ulfina, Tamme, Kaba, Berehe, Lemma and Woldu (2014) show that having knowledge about contraceptives through various sources of information was not enough to result into actual use of contraceptives. This means that people's access to information about modern contraception may not necessarily mean that they will use them though to some extent this knowledge is transformed into practice.

According to the Protection Motivation Theory, behaviour change may be achieved by appealing to an individual's fears (Rogers, 1975). Three components of fear arousal are the magnitude of harm of a depicted event; the probability of that event's occurrence; and the efficacy of the protective response (Rogers, 1975). Contraceptives users are influenced by fear to get pregnant, fear to have many children, desire to space children, desire to stop having children, among others. Due to such fears and desires they end up seeking knowledge about various modern contraceptive methods which they later use.

Table 1: Chi-Square test on rating the awareness of modern contraception in relation to Christian family values

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	55.620 ^a	16	.000
Likelihood Ratio	59.643	16	.000
Linear-by-Linear Association	5.538	1	.019
N of Valid Cases			270

a. 12 cells (48.0%) have expected count less than 5. The minimum expected count is .47.

A Chi-Square test was used to determine whether there was an association between certain factors such as sharing with friends as a way of creating awareness of modern contraceptives use and affecting sacredness of sex as a Christian family value. The results indicate that *p*-value of 0.000 obtained is less than 0.05 significance/alpha level (*a*), hence, the null hypothesis that modern contraceptives awareness has no significant relationship with Christian family values was rejected. Based on this, there is significant relationship between sharing with friends as a way of creating awareness of modern contraceptives use and affecting sacredness of sex as a Christian family value.

These findings support Michael (2012) whose study finds out that education level, occupation, traditional or cultural beliefs, and support from husband/partner as well as access to information are the factors associated with contraceptive use. This means that access to information on modern contraception among other factors may increase one's likelihood to go in for family planning. Another study conducted by Allege, Matovu, Ssensalire and Nabiwemba (2016) is also in agreement with these findings as it shows that knowledge of family planning (FP) methods is almost universal and that six in ten women use any family planning methods. Clinic providers, friends and the mass media are seen to be the most trusted sources of family planning information. This means that people get a lot of information about modern contraception through various sources such as friends, mass media and clinical providers. Such awareness might be transformed into practice and use of contraceptives. Brown, Islam, Marta and Salcedo (2014) also discover that mass media increases the likelihood of women using modern forms of contraception.

CONCLUSION AND RECOMMENDATIONS

The aim of the study was to examine the level of awareness of modern contraceptives use and family planning methods among Catholic families of Hoima Diocese in Uganda. It established that modern contraceptives were being used by some Catholic Christians in Hoima Diocese. Various sources of information create awareness to the people about the use of modern contraceptives. These include: medical practitioners, radio

programmes, television programmes, newspapers and sharing with friends. This awareness about contraception leads into the use of modern contraceptives. As a result, modern contraceptives use has an influence on Christian family values such as sacredness of sex, fidelity/faithfulness, respect for life, chastity/purity, conjugal love, respect for self and others. The study recommends that policy makers, should make policies which promote life and the welfare of the family as an important institution in society. Therefore, types of contraceptives which cause harm to the health of users should be checked and natural family planning methods be encouraged as they have no negative effects. Parents should also guide their children as regards the Christian family values and the Catholic Church teachings on matters of contraception.

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