Knowledge and Perception of Ghanaian Adolescents about Family Planning

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Abstract

Background: Adoption and utilization of family planning services have been evidenced to be useful in preventing sexually transmitted infections, reducing unintended pregnancies, reducing maternal and child mortality and this serves as a key means to meeting the Sustainable Development Goals (SDGs). Despite these enormous benefits, the use of family planning methods still remain preponderantly low among citizens of developing countries. In Ghana, there have been alarming media reports and also reports from the Ghana Health Service of higher rates of unintended pregnancies, criminal abortions, unhealthy sexual behaviors such as low contraceptive usage among adolescents and a paradox of stagnation in continuity of formal education due to the negative consequences of risky sexual behaviors. This study was designed to look critically into adolescents’ perception and knowledge about family planning so as to provide baseline data to guide in interventions towards improving contraceptive use.

Aim: The aim of the study was to determine knowledge and perception of adolescents about family planning.

Method: A cross-sectional design was used for this study. A purposive non-probability method of sampling was used to recruit 150 adolescents of both genders who were schooling in Ayawaso-central district of the Accra Metropolis. A structured questionnaire containing open ended questions, closed ended questions and rating scales was used as the tool for collecting data from respondents.

Results: Findings from this study revealed that about 67% of participants were aware of family planning but only 10% of them had in-depth knowledge about family planning. Although awareness level was high among the participants, myths about family planning existed. Also, 60% of respondents perceived family planning usage as not important in adolescence even though 27% claim to be sexually active.

Conclusion: Our findings suggest that there is a high level of awareness but low in-depth knowledge about family planning among adolescents in the area. The adolescents also associated myths and negative perceptions to family planning usage. There is therefore a need for in-depth education on family planning and not just awareness creation. We therefore recommend the setting up of adolescent sexual and family planning clubs in Junior High Schools to serve as channels for providing in-depth education to pupils.

Introduction

Sexual activity among adolescents in sub-Saharan Africa occurs mostly at the age of 15 years, this sexual debut occurs with associated insufficient knowledge about contraception and also non-use of contraceptives which places them at high risks of HIV/STI’s and unplanned pregnancies (Doyle, Mavedzenge, Plummer & Ross 2012). Eighty-two percent of the 2.1 million adolescents afflicted with HIV/AIDS as estimated in 2012 were living in sub-Saharan Africa. Reasons for this disturbing percentage include early sexual debut, ignorance and underutilisation of family planning services (Idele et al. 2014).

Adolescent sexual activity and teenage pregnancy is an important public health issue because they are associated with maternal, fetal, and neonatal adverse outcomes (Hagan & Buxton 2012). Adolescents and parents differ in their perceptions surrounding sexual intercourse engagement and protecting themselves from the advertent possibilities of unintended pregnancy and sexually transmitted infections (Asampong, Osafo, Bingenheimer & Ahideke 2013).

Whitaker & Gilliam (as cited in Hagan & Buxton 2012), identified that adolescent girls who get pregnant are likely to drop out from school and adolescent parents are unlikely to have the social and economic means to raise children. Further, unintended pregnancy poses a major challenge to the reproductive health of young adults in developing countries. With the decreasing age of menarche and onset of sexual activity, young people are exposed early to unplanned and unprotected sexual intercourse leading to unwanted pregnancies and...
invariably abortions especially very common in many Sub-Saharan African countries (Okonofua; Westoff, as cited in Hagan & Buxton 2012).

It will be scientifically exciting to explore the knowledge and perceptions adolescents have about family planning so as to provide a plausible explanation for the current rates of utilization of family planning services by adolescents.

Objective of the study

The main objective of this study was to determine the knowledge and perception of adolescents in Junior High School in Ghana have about family planning.

Methods

Study design

The study is a descriptive cross-sectional survey of the knowledge and perception of adolescents about family planning methods in Ayawaso-Accra, Ghana. It is descriptive because a quantitative analysis was used to analyze the results elicited by the questionnaires. It is non experimental as the study was conducted in the natural setting of the participants without any controls.

Population and sample

The study is designed solely to assess the knowledge and perceptions of adolescents about family planning, hence the focus on adolescents. Out of the wide range of adolescents, the main focus was on adolescents between the ages of 11-14years in Junior High Schools in Accra, Ghana.

Sample and Sampling Techniques

In this study, the purposive sampling method was used which, according to Silverman (2005:129), allows a researcher to choose a case because it offers an explanation to a feature or a process that she or he is interested in. Sample size used was 150 which were derived using Krejcie, R.V. & Morgan, D.W. (1970).

The formula for determining the sampling size was:

\[ S = X^2 N P (1-P) + d^2 (N-1) + X^2 p (1-p) \]

where:

- \( S \) = required sample size
- \( X^2 \) = table value of chi-square for 1 degree of freedom at the desired confidence level (3.841)
- \( N \) = Population size
- \( P \) = population proportion (assumed to be .50 since this would provide the maximum sample size)
- \( d \) = degree of accuracy expressed as a proportion (.05).

It has been estimated that about 61,596 pupils attend Junior High Schools in Ayawaso District of Accra of which about 4,000 are within Ayawaso Central Sub-District. A sample size of one hundred and fifty was chosen for the study.

Data collection methods

The data was obtained from the respondents through the administration of questionnaires during field work. The respondents’ were contacted in their various classrooms in the three chosen schools at Ayawaso after obtaining institutional approval from the Ghana Education Service and from the heads of the various schools (Appendix A). A letter of introduction was taken from the West End University College to Accra Metro office, approval from Accra metro office was taken to Accra New Town Experimental ‘1’ Junior High School, Accra New Town Experimental ‘2’ Junior High School, and St. Johns Junior High school all located within Ayawaso central to seek permission before administering the questionnaire. Informed consent forms were given to parents/guardians to obtain permission to enrol their wards unto the study. This was after the entire rationale for the study as well as the risk and benefits had been explained and all questions answered. Each parent was given a photocopy of the informed consent form while the original was kept by the researchers. Participants were told that participation in the study was voluntary and also they were not to provide any form of identification on the questionnaire so as to maintain confidentiality. Questionnaires were administered to the respondents’ and ample time given for them to answer the questions on the questionnaire. Those who could not comprehend or read English well any question had the questions interpreted to them. A maximum of thirty one days was used to collect the data.

Data processing and analysis

Data collected was entered into Microsoft Excel 2007 spread sheet and imported to SPSS (Statistical Package for Social Sciences) version 20 for analysis. Results were presented with simple statistical tools.

Pretesting

A pilot study was conducted on a sample of twenty respondents that did not belong to the sample frame of the main study to determine any ambiguity in the questionnaire. The necessary redesigning of questions and deletion of irrelevant questions was made before the final administration of the questionnaires to respondents.

Ethical considerations

A letter of introduction was taken from the West End University College to Accra Metropolitan Education Office to obtain institutional approval. Approval was granted, which enabled the researchers to carry out the study in all selected schools. Prior to administering the questionnaire, the purpose of the study was explained to participants while ensuring confidentiality. Informed consent was obtained from the parents/guardians of the participants. Respondents were told that participation was
voluntary and that at any point of the study, they could opt out or continue in the study if deemed necessary. Participants were told that there was no need for personal identification.

Results

The results indicate that of the total number of respondents 73 of them were males while 77 of them were females. 60 out of these were within the age range of between 13 and 15 years, 35 of them were within the age range of 16 and 18 years, while 25 of them were within the age range of 10-12 years.

Of the total sample size (150), only 100 of them responded that they were aware and had knowledge about family planning. Although these number of subjects laid claim that they were aware of family planning, a significant proportion of them (60%) responded that modern family planning is not important while only 40% of them reported that family planning is of significance. Television and radio were the most reported mediums through which respondents obtained information regarding modern family planning methods. Condom was the most known method of family planning known to respondents.

It is alarming that as much as 60% of the respondents perceive family planning as a bad practice. Despite this, some of the respondents were already indulging in sexual intercourse, of which each one of them was using one method of family planning or the other.

Significant percentages of the respondents were harboring several myths about family planning. Responses raging from that family planning causes cancer, encourages antisocial behaviors and indiscriminate sexual intercourse among adolescents as well as causing infertility and barrenness. Religiosity was observed as an issue that may have significant issue that may have influence on how adolescents will use modern family planning methods as a significant proportion of them made claim that users of modern family planning methods are not righteous. Also marriage was observed as a factor as may influence respondent decision on contraceptive use, as many respondents reported that family planning is supposed to be adopted only by married couples. Also misconceptions, contraceptive side-effects as well as unwillingness of sexual partners to use contraception are major

Discussion

The study was conducted to assess the knowledge and perception of adolescents on family planning among adolescents in Ayawaso. A sample size of one hundred and fifty (150) adolescent was used to gather data after which the results were analyzed.

Awareness versus Knowledge Level of Respondents on Family Planning

Responses by respondents in this study regarding family planning awareness and knowledge suggest that most of the respondents 100 (67%) out of the 50 (33%) were aware of modern family planning methods of which 90 out of 100 who were aware claimed that they conversant with family planning. However, only 10% claim to have knowledge about family planning. This in contrast with Dangat and Njau (2013) who revealed in their study that two-third of their total number of 316 adolescent respondents have adequate knowledge about family planning. Our results is also in contrast to what was Enuameh, et al, (2015) found in their study that where they indicated that 87.7% females and 82% males in their study had sufficient knowledge about family planning. However, our finding is in line with findings by Agyekum and Kayi (2013), who revealed that knowledge about family planning was very low among adolescents in their study.

Our study reveal that television and radio as were sources from which most of the respondents received information about family planning, with the former 40% respondents and the later 35% respondents. This absolutely negates what was revealed by Nattey, et al, (2015) where radio (50.4%), social events (29.2%), and television (28.2%) were the most occurring sources where participants received information about family planning.

Perceptions about Family Planning

Findings in our study revealed that only 60% of respondents were aware about family planning believe that family planning is a good practice, as alarming as 40% reported that family planning is a bad practice. In the same vain these only 40% of respondents perceived family planning as very important in improving reproductive sexual life while as alarming as 60% perceived that family planning is not important in reproductive sexual life. This revelation supports Aryeetey, Kotoh & Hindin (2010) study which indicated that majority of their respondents perceived that modern family planning methods are not safe for reproductive health. This however, our study is in contrast with what was obtained by Aransiola, Akinwumi & Fatusi, (2014) whose study orchestrated that respondents perceive family planning as highly effective and important for reproductive health.

Sexual activity versus Contraceptive Usage

This study identified that of the 150 respondents, 41 of them as depicted in figure 4.3.2 were sexually active. Also of the total number of respondents who reported being sexually active, only 25 of them claimed they were using one form of family planning or the other. This revelation is seen as depicted in figure 4.3.3. where alarming as 7 respondents claimed they were using withdrawal as a
method of preventing pregnancy. Male condom was the most used (12). Injectable and pills were listed used by sexually active respondents. This revelation may infer that majority of sexually active adolescents who are sexually active are involved in risk taking sexual behaviours which may negatively affect their health and the realization of future aspirations. This revelation supports what was evidenced by Enuameh et al. in their study, where they indicated that only 17.9% of females and 6% of males uses family planning methods in improving reproductive health.

**Myths of Adolescents about Family Planning**

Several myths were reported by adolescents in this study. These includes, family planning causes cancer, prevents conception, causes infertility, encourages indiscriminate sexual intercourse among adolescents and also promotes antisocial behaviours in adolescents. These are depicted in figures 4.4.1, 4.4.2, Tables 4.4.1 and 4.4.2. These responses are in line with studies by Dangat & Njau in Tanzania, and Enuamah et al. in Ghana.

**Factors that could influence adolescents in their choice of family planning methods**

The believes that the use of modern family planning methods amounts to unrighteousness as depicted in figure 4.5.1, modern family planning methods were introduced by Europe and America to reduce the black race as depicted in figure 4.5.2, and they believe that contraceptives should only be used by married couples were identified as factors that may influence adolescent decision in their choice of family planning. This revelation is similar to findings by Agyekum & Kayi in Ghana, and Maro et al. (2016) who study revealed that older men and women in Tanzania belief that family planning was introduced to kill younger women and to reduce their ability to procreate. Misconceptions and unwillingness by partners were also identified in our study as factors that may influence family planning decision as depicted in figure 4.3.3. This revelation holds firm what was evidenced by Adongo et al. in Ghana and Kennedy et al. where they both reported that misconceptions and unwillingness by sexual partners to use contraceptives affects family planning decision making.

**Summary**

The study observed that there exist wide discrepancy between what teenagers know regarding family planning methods and believe they attach to it. This may if not properly addressed affect how they would react to and use family planning when they finally become sexually active. Though, majority of the studied group representing 67% reported they were aware of family planning methods, as much as 33% reported they were not aware of planning. This is very significant considering the population of adolescents this will translate to if used for generalization. This result is almost similar to Tweri & Tweri’s work, which indicated that only 62% of their study participants who were adolescents were aware of family planning while 38% of them were unaware. However, this is a relatively contradictory of what was reported by GSS in 2008, as well as what was reported by Aryee tet al, that “there exist universal knowledge about family planning among Ghanaians”. With reference to this study outcome, there is need for more awareness creation on family planning methods and its use among adolescent.

Parents have been ranked as the least sources of knowledge awareness regarding family planning and its use (Hagan, et al. 2012), our study validates this evidence. This indicates that the African traditional believe that it is inappropriate to talk to children and discussing with them about subjects relating to sexuality is still held in high esteem. This nonetheless is still given much attention by most African parents and families not to talk about sexuality related matters with their wards. However, our study also opposes what is affirmed by Hagan & Buxton 2012, that friends are the most prevalent source of information from which adolescents come to know about family planning. However, our study affirms what was revealed by Nattey et al, 2015 study that social events (29.2%) and television (28.2) are the most reported sources of information regarding family planning among their respondents. Our study magnifies television as the most prevalent medium from which adolescent accesses knowledge regarding family planning which is followed by radio.

It is alarming that as much as 60% of our study participants view family planning as relatively not important while only 40% of them felt that it is important. This is a shocking revelation, because these young adolescents a growing into a period where they are going to enter into relationships where sexual intercourse may be involved. This is because in the Ghanaian context, sexual abstinence before marriage can never be guaranteed. With the associated events of rape cases both reported and unreported, teenage pregnancy and its associated complications as well as labour and delivery complications incidents, adolescents are expected at this level of education to know how important family planning is.

A significant percentage (37.5%) of sexually active participants in our study indicated that Condom was the most widely used method of family planning. This affirms what has been established by other studies (Hagan, et al., 2012). Other sexually active participants in our study used Contraceptive Pills and injectables. An alarming percentage of 37.5% of the sexually active participants indicated that they do not use any form of family planning. This translates that a vast majority of teenagers are risking HIV, STIs, Teenage
Pregnancy and other pregnancy related consequences.

Condom was reported to be the most widely known method of family planning. This affirms what has been established by other studies (Hagan, et al., 2012; GSS, 2008; Ayeete, et al, 2010). Contraceptive pills followed by injectables were somewhat known by respondents. However, other methods were list known to them.

This study also reveals that study participants perceive family planning users as unreligious entities of the society and that the use of family planning leads adolescents to engaging in unprecedented sexual activities and intercourse as well as antisocial behaviours. This is concomitant with study findings established by Enuameh, et al, 2015; and Nettey, et al, 2015.

Various misconceptions about family planning are harboured by significant majority of study respondents in this study. This includes; family planning causes cancers, leads to infertility and barrenness, was introduced by America and Europe to reduce the population of the black race, does not improve the health status of users as well as cannot provide protection against pregnancy related complications. This affirms studies by Adongo, et al, 2014; Costa, et al, 2013; Dangat & Njau, 2013; Nettey, et al 2015; and Enuamah et al, 2015.

Finally, revelations in this study of adolescents knowledge and perceptions regarding family planning and its methods orchestrates that misconceptions and lack of proper family life education (sex education) is a major problem as to why adolescents lack sufficient knowledge about family planning and also harbours myths and misconceptions regarding family planning, use and practice.

Implications for Nursing

Nursing Practice:- Nurses in the clinical environment should be informed that adolescents in Junior High Schools lack adequate knowledge regarding family planning, harbour myths about family planning and are sexual active, hence the need to provide in-depth education to adolescents when they attend health centres.

Nursing Education:- Nursing students should be informed and thought sexual reproductive health needs of adolescents.

Nursing Research:- More research is needed in the field of sexual and reproductive health of adolescents so as to improve safety and quality of services rendered to them in relation to their sexual and reproductive health needs.

Conclusion

Adolescent in Junior High Schools in Ayawaso Central Sub-district have insufficient knowledge about family planning, as well as harbour numerous misconceptions which may affect sexuality and reproductive health decision they make at present and in future as some of them are already sexually active.

Recommendations

Considering the high state of increase in Sexually Transmitted Infections, HIV, unintended adolescent Pregnancy, and increase in pregnancy related complications among adolescents, it wont be out of place to make the following recommendations;

1. Intense public education on family planning for adolescents is essential if sexual and reproductive health of the nation is to improve.

2. Health clubs should be established in junior High Schools so that adolescents will always be informed of current trends in sexual and reproductive issues as it concerns them.

3. Further studies should be carried out regarding this topic in other districts in Ghana. Those studies should try to address various aspects which our study failed to address.

4. Policy makers in the educational sector, parents and other members within the health sector should take the issue of family life education (sexuality education) for adolescents seriously.

Competing interests

The authors declare that they have no competing interests.

Authors’ contributions

All authors contributed to conception, design, acquisition of data, analysis and interpretation of data, and involved in drafting the manuscript or revising. Also all authors read and approved this manuscript for publication. DKK: drafting of proposal, collection of data, presentation of findings and reviewing of manuscript. AM: drafting of proposal, editing and supervising of data and reviewing of manuscript. AH: drafting of proposal, collection of data, presentation of findings and reviewing of manuscript. PAY: drafting of proposal, collection of data, presentation of findings and reviewing of manuscript.

Acknowledgement

Our in-depth appreciation goes to our esteem research respondents who took their time to give us their honest answers to our questions, may the good lord remain the source of their strength all. In a special way, we want to thank and appreciate the effort of our beloved parents, our brothers and sisters, our love once for their untiring encouragement, moral and their financial support to

Imperial Journal of Interdisciplinary Research (IJIR)
the success of this work, thus making our ambition a reality. Worthy of appreciation are the following personalities in our life, Mr. Wisdom Akpaloo, Dr. James Antwi, Mr. Charles Amoako, Miss Rebecca Ado, Miss Happy Stella Djokoto we recognized your effort all, we are grateful.

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