Women’s Attitudes and Knowledge towards the Use of Contraceptive Methods

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Abstract

Background: Contraceptive use reduces the need for abortion by preventing unwanted pregnancies, and the causes of maternal death worldwide. Contraceptive use helps women to plan their pregnancies and contributes for population growth. This study aims to analyze the attitudes and knowledge of the women attending Van Norma Clinic for the use of contraceptive methods.

Methods: A cross-sectional study was used to analyze the information. A convenience sampling method has been used to select the 100 women who attended Van Norman Clinic in Family planning service in the period of the study of four months (April to July, 2020). A self-administered questionnaire with four parameters addressing importance of using contraceptive methods, the factors affecting the women’s attitudes for not using contraceptive methods, types of contraceptive methods currently used, advantages and disadvantages of using contraceptive methods was used to collect data.

Results: Research findings show that the majority of respondents knew the importance of using contraceptive methods like preventing unwanted pregnancies (97%), spacing pregnancies (96%), planning pregnancies (92%), and getting well (70%). Two factors affecting women for not using contraceptive methods had been identified such as religion (73%) and fear (70%). In addition, the women attending Van Norman Clinic prefer using implants (99%) and injectable (99%). It is clear that women do not know the consequences related to the nonuse of contraceptive methods. Some recommendations have been made to the health care facilities, parents, women themselves, churches’ leaders and government in general.

Conclusion: Factors which influence women’s attitudes for not using contraceptive methods were notified in our study such as religion (73.0%) and fear (70.0%) which was explained by the fact that in Burundi most people are catholic which is the most religion prohibiting the use of contraceptive methods. However, the participants’ knowledge was...
significantly good as their score was more than 50% for all variables.

**Keywords**

Contraceptive Method, Family Planning, Women, Attitude, Knowledge

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1. Background

Family Planning (FP) in which the major component of its use is the contraceptive methods, is the key of health. Contraceptive use reduces the need for abortion by preventing unwanted pregnancies and the maternal death worldwide. Contraceptive use helps women to plan their pregnancies and contribute to population growth (WHO 2018) [1]. This is important because overpopulation puts pressure on the environment, the economy and services such as education and health. It contributes to the benefits of women, men, children, families, and their communities. In addition, the growing use of contraception around the world has given couples the ability to choose the number, spacing their birth and have great life-saving benefits [2].

Women who don’t use contraceptive method are likely to have more pregnancies, exposing them to high risk of related maternal mortality and morbidity, unwanted pregnancies and death. These risks affect also directly the economy, political and social lives. 1 out of 26 women of reproductive age dies due to maternal problem in Africa [3]. It concluded that children from large families generally receive less education [4]. In the USA, the study conducted for Panel study of Mothers showed that unwanted births can lead to postpartum depressive psychosis, feelings of powerlessness, increased time pressures, and a reduction in overall physical health [5].

In developing countries like Ethiopia, the highest level of contraceptive use is observed, where the study conducted reported that rural women revealed that their livelihoods had been greatly improved after they began to use contraceptives. This has securing extra time, energy and social activities. The use of contraceptive methods helps women to delay unwanted pregnancies childbirths. It helps also to be engaged in numerous activities that generate incomes not merely for boosting family’s resources but also to create opportunities for them so that they can mobilize different resources without waiting their husband’s contributions.

In 2009, the United Nations reported that West and Central African countries report very low rates of family planning use [6]. In Burundi, several studies have been carried out about contraceptive methods and report a greater uptake when they are associated with other strategies developed by the health professionals engaged and trained in family planning service that provide available contraceptive methods [5]. A study conducted in rural Burundian setting showed a low use of contraceptive methods among Burundian due to many factors such as lack of healthcare providers to administer contraceptive methods, myths that
lead to high fertility impacting maternal and child morbidity and mortality. Women alleged that they are scared when they go for family planning [7].

Even though that the use of contraceptive methods has increased from 18.6% in 2010 to 28% in 2015, some challenges are still rising again such as demographic rate death, malnutrition, economic status, poverty in the household, and other types of diseases [8]. Therefore, this study aims to assess the attitudes and knowledge of the women attending Van Norma Clinic about the use of contraceptive methods.

2. Conceptual Framework

Virginia Henderson’s need theory was used to analyze the women’s needs on the use of contraceptive methods. She conceptualized the nurse’s role as assisting sick or healthy individuals to gain independence in meeting the 14 fundamentals needs (Table 1). The main purpose of using nursing need theory during our research is to help women who do not use contraceptive methods to know the impact related to its nonuse. In the end, the women will develop new ideas which will help them to increase the use of contraceptive methods. She out listed the concepts on fundamental of human needs, bio-physiology, culture and interaction communication, which give the theory a dynamic coverage regarding patient’s needs.

| Concept | Virginia Henderson’s Theory | Nurses | Women | Contribution |
|---------|-----------------------------|--------|-------|--------------|
| 1. Individual | Individuals have basic needs that are components of health. Mind and are inseparable and interrelated. | Nurse must assist the women to achieve independence. | Women’s needs are components of their health which require nursing assistance. | The researcher will show the women the importance of using contraceptive methods, |
| 2. Environment | Environment includes the settings in which an individual learns unique pattern for living. They are all external conditions and influences that affect life and development. | Nurses provide conditions under which the women can perform the 14 activities unaided. | Women come to visit health care facilities for contraception because they need to be healthy. | The researcher will help women who meet health problem related to the nonuse of contraception to recover health, to gain independence as rapidly as possible which will regulate their reproduction. |
| 3. Health | The health is defined based on individual’s ability to function independently as outlined in the 14 components. | Nurses need to stress promotion of health and prevention and cure of effects related to the nonuse of contraception. | |
| 4. Nursing | Nurses temporarily assist an individual who lacks the necessary strength, will and knowledge to satisfy 1 or more of 14 basic needs. | Nurse role is to get inside the patient’s skin and supplement strength will or knowledge according to his needs. | |
3. Methods

The participants in this study were women who attended the health facilities of CVN especially in family planning service from April to July, 2020, a free Methodist Church related institution located in the north District of Bujumbura city, in Ngagara-Burundi.

A cross-sectional study was used to analyze the attitudes and knowledge of women towards the use of contraceptive methods. A convenience sampling method was used to select the 100 women who attended Van Norman Clinic in Family planning service in the period of the study. All women coming for contraceptive methods at CVN during the study period were approached individually and those who agreed to collaborate with the interviewer were included while those women who were not coming for contraceptive methods or those who refused to collaborate has been excluded in the study. The investigator had to explain before the aim of the study and after giving their verbal consent, participants were given a questionnaire to fill in. A self-administered questionnaire with six parameters addressing demographic data, importance of using contraceptive methods, the factors affecting the women’s attitudes for not using contraceptive methods, types of contraceptive methods currently used, advantages and disadvantages of using contraceptive methods was used to collect data. The authors designed it to analyze the association between the independents variables such as demographic characters (age, level of education), sociocultural (religion, traditional and cultural beliefs) and dependent variable (nonuse or use of contraceptive). It has 34 items devised into the six parameters: the first one is the demographic data with 4 items exploring the participant’s social and marital status; the second parameters with 4 items exploring the participant’s knowledge on the Importance of using contraceptive methods; the third with 7 items exploring the participant’s awareness on different types of contraceptive methods currently used. The fourth with 7 items analyzing the factors affecting women’s attitudes for not using contraceptive methods; the fifth with 7 items analyzing the participant’s knowledge on the consequences related to the nonuse of contraceptive methods, the sixth one analyzing the participant’s knowledge of the advantages and disadvantages of using contraceptive methods (with 3 and 5 items, respectively). The score of the results was classified referring to the items’ scored by participants in each section of variables. It was bad for those whose score was less than 50%, medium for those with 50% and good for those with score over 50%. Authors did not test the validity and reliability of the questionnaire.

A Statistical Package for Social Scientists version 16.0 for Windows software (SPSS) and Microsoft Excel software were used to analyze data which were presented as a frequency tables, pie charts or bar graphs.

Literature review was generally reviewed on types of Contraceptive Methods, Hormonal Contraceptives, Intrauterine Devices, Barrier Methods, Locational Amenorrhea Method, Coitus Interruptus (Withdrawal), Female and male Steri-
lization, Emergency Contraceptive Pill and Rhythm Method.

4. Results

All selected sample of 100 women were able to fill out the given questionnaire.

4.1. Socio-Demographic Data of Participants

Among the participants, the half of them (50%) have primary school, 40% secondary school and 10% have the university level.

The age of participants ranged from 18 to 49 years ($\bar{x} = 29$); among the one hundred women who participated in this study, majority of them were married, representing 98%. Majority of the participants were aged between 24 - 29 (31.0%), while the women whose age ranged between 18 - 23, 30 - 34, 35 - 39, 40 - 44, and 45 - 49 were accounted for 13%, 22%, 17%, 13% and 4% respectively (Table 2).

| Characteristics | Frequency (N = 100) |
|-----------------|-------------------|
| Age Range       | 18 years - 49 years |
| Mean            | 29                |
| Sex             | Female: 100 (100%) |
| Married:        | Yes: 98 (98%)     |
| Single:         | Yes: 2 (2%)       |
| Education level | Primary: 50 (50%) |
|                | Secondary: 40 (40%) |
|                | University: 10 (10%) |

4.2. Importance of Using Contraceptive Methods

Most of the participants have shown a satisfactory knowledge on the Importance of using Contraceptive Methods, as 97.0% know that the importance of using contraceptive methods is to prevent unwanted pregnancies, 96.0% is to space children, 92.9% is to plan pregnancies and 70.0% is to get wellbeing (Figure 1).

4.3. Knowledge on the Different Types of Contraceptive Methods Currently Used in Burundi

On the other hand, participants also revealed a good knowledge on the different types of contraceptive methods which are currently used in Burundi, where they argued that the following contraceptive methods are currently used; injectable and implant (99%), combined oral contraceptive (94.9%), intra uterine devices (93.9%), condoms (88.9%), sterilization (75.0%) and for fertility awareness (66.0%).

4.4. Factors Affecting the Women’s Attitudes for Not Using Contraceptive Methods

Majority of the Respondents do not use contraceptive methods because of the
Religion beliefs (73.0%), fear (70.0%), exposure to mass media (51.5%), lack of knowledge of its importance (45.0%), ignorance (42.2%) and age (33.0%) (Figure 2). Even though, this study revealed also that participants know the consequences related to the nonuse of contraceptive methods as 95.0% argued it leads to get no spaced pregnancies. Other consequences related to the nonuse of contraceptive methods has also revealed; like to have a great number of children (93.0%), unwanted pregnancies (94.0%), economic instability (88.0%), maternal death (54.0%), infant mortality (48.5%) and abortions (33.3%).

4.5. Advantages and Disadvantages of Using Contraceptive Methods

Majority of the participants 94.0% know that the use of contraceptive methods has advantage of improving relationship between mother and children, 87.0% argued that it improves social and economic status of the women, while 55.6% know that it decreases the morbidity and the mortality.

Most of the participants (94.9%) know that the most disadvantage of using contraceptive methods was to get irregular menstrual bleeding. On the other hand, (93.9%) said that they can get amenorrhea, or get discomfort (85.0%), vaginal bleeding (82.8%) and others confirm to get pregnant under contraception 56.6% (Table 3).

![Figure 1](image1.png)

**Figure 1.** Distribution of respondents according to the knowledge on the importance of using contraceptive methods.

![Figure 2](image2.png)

**Figure 2.** Distribution of the respondents according to the factors affecting women’s attitudes for not using contraceptive methods.
Table 3. Distribution of the respondents according to the knowledge on the disadvantages of using contraceptive methods.

| Characteristics                        | Yes (%) | No (%) |
|----------------------------------------|---------|--------|
| Vaginal bleeding                       | 82.8    | 17.2   |
| Amenorrhea                             | 93.9    | 6.1    |
| Irregular menstrual bleeding           | 94.9    | 5.1    |
| Get pregnant under contraception      | 56.6    | 43.4   |
| Discomfort                             | 85.0    | 15     |

5. Discussion

According to WHO, Family planning is defined as “a way of thinking and living that is adopted voluntarily, upon the basis of knowledge, attitudes and responsible decisions by individuals and couples, in order to promote the health and welfare of family groups and thus contribute effectively to the social development of a country”. The use of contraceptive methods which is the major component of Family Planning (FP) is a key of health as it has been shown to reduce the need for abortion by preventing unwanted pregnancies, and the causes of maternal death worldwide. Also, it helps women to plan their pregnancies and contributes for population growth [4] which aligned with our findings for the importance of using contraceptive methods (Figure 1).

During our study the majority of respondents were aged between 24 - 29 years (Table 2). This is explained by the fact that the majority of our participants did not finish their studies leading them to the earlier marriage and start their conception in low age. Burundian women got their first sexual intercourse 3.3 years before men. The median age of first sexual intercourse increases with the level of education; 19.0 years old for women without level of education against 24.0 years old with secondary school or above. For these women who got married at the age of 20s, after one year of marriage, Burundian women get their first birth [8]. This has negative impact on women status because once a woman starts their reproduction activities early, they increase the chance of having a big number of children by family. In addition, it leads to high fertility which will cause to high public insecurity, health insurance problems and merely to the nutrition’s problems in low-level families. Women will meet other consequences on their health such as infant and maternal mortality.

The current study revealed that half of the participants (50%) have primary level. This is explained by the low sources of revenues of parents, the periods of war that Burundi has passed through which made children not to continue their studies. All those factors have negative impact on the knowledge of women. This will lead these young women in early reproductive age to have many children in their families or get unwanted pregnancy because of lack of awareness on how one can prevent unwanted pregnancy. The increase in number of educated women will get them to plan their birthhood and be able to have a number of
children that they will be able to manage according to their financial status. It is well advised for parents to give births to children that they are able to fulfill their needs like to pay school fees; it is the children’s right to go to school. It is also important for the Government to maintain its politics related to tuition fees for studies. For women who are in reproductive age, they need to be informed and taught the importance of using contraceptive methods. The education of women has a great effect on several health parameters and is among the utmost determinants which are studied on the contraception use and unmet needs [9].

Women’s attitudes toward family planning are influenced by their experiences such as education and pregnancy; because it was found that women who had a primary school graduate or higher education, has 1 to 3 pregnancies and did not want more children in the future. As the level of education increases, the number of children required decreases. The reason for this can be explained by the opportunity to learn about family planning and to raise awareness about the issue. This concurs the findings which revealed that desire of using contraceptive methods among illiteracy women was certainly low due to lack of awareness of their benefits or even existence [10].

Majority of the participants said that the importance of using contraceptive (Figure 1), was to prevent unwanted pregnancies (97.0%) which aligned with the WHO’s finding that most of women (96.5%) use contraceptive methods for preventing unwanted pregnancies [11]. Thus, this is justified by the knowledge that they receive from healthcare providers when they go to join healthcare facilities in the antenatal services or in class during reproductive health courses.

Even though that majority of women have responded positively to their importance, doesn’t mean that they are fully aware of its importance, because the average rate of children by household in Burundi is 6 children. This simply shows that Burundian’s women are in the situation to understand the really importance of using contraceptive methods [8]. Studies conducted in Bangladesh, the US and West Africa also support the conclusion that contraceptive use has improved women’s ability to be involved in productive work and other socio-cultural aspects by avoiding unwanted pregnancies [12]. This comes to support our current study by showing the reason why women in the world use contraceptive methods. So, most of the women use contraceptive methods because they know its importance which is merely to prevent unwanted pregnancies.

The current study revealed that most types of contraceptive methods used by many women were injectable and implant (99.0%). Bucumi (2008, p.76), Niyonzima (2011, p. 56), Family Health International (2009, p.21) and Kessy (2006, p.4) noted that the most used family planning method among the subjects is the injectable accounting for 24.5%, 36.0%, 34.4%, 69.3% respectively in each study. The preference of the injectable among the respondents at Van Norman Clinic is justified by the fact that this injection is given once every three months and the patient will only come back for the injection without any particular guidelines to follow while at home. Also, they revealed that they preferred implant because it
is long-lasting and they are secured with it for not getting pregnant where they will come back for other reason.

The current study revealed also that women knew many types of contraceptive methods, enhance them to choose any type of method that they feel free as the best one. It was also clear that health care facilities of Van Norman Clinique understood the wishes of their clients about the choice of contraceptive method.

In our study the religion was the most reason prohibiting the use of contraceptive methods among the participants (73.0%) (Figure 2). In Burundi the Roman Catholic Church is very predominant one (60%), with its strong ideology against the use of contraceptive methods in Africa while Burundian government has been promoting the awareness use of family planning nation-wide. This factor has negative impact on women’s status where they will give birth to many children caused by unwanted pregnancies, enhancing them to no spaced pregnancies, abortions, infant and maternal mortality. The socio-economic status will be affected by families with many children who won’t be able to pay education fees. Fear was another reason prohibiting women for not using contraceptive methods (70%), and the main reason for not using contraceptive methods among subjects was fear of side effects. It is explained by the fact that most of women like to follow what others talk about effects of using contraceptive methods which make them afraid for using contraceptive methods. It may lead to the nonuse of contraceptive methods to the women with fear of side effects which will lead to high fertility in the country. To decrease these factors which cause high fertility, the Burundian Government in collaboration with churches’ leaders could teach the Christian how to limit their birth rate per family through using contraceptive methods. Also, health care facilities have a huge role to play by explaining that effects related to the use of contraceptive methods are manageable and not fatal.

Our study revealed also a sufficiency knowledge among participants, where most of them knew the consequences of not using contraceptives methods like non spaced pregnancies (95.0%), a great number of children (94.0%), unwanted pregnancies (93.0%). This is explained by the knowledge that they got through clinical visit, from others who have been in family planning services or from those who are skilled in healthcare sciences. This concurs with the study of Mussie et al. that the large proportion of women use contraception for child spacing (65%) than to limit the children number (17%) [13].

The findings revealed also that the use of contraceptive methods has the most advantages by improving the mother and children relationship (94.0%) and the socio-economic status of the women (87.0%) as they will be able to have time of relaxing and take care of them as they will be well aged spaced and in number manageable. Frenette (2011) argued that the use of contraceptive methods includes securing more time, energy and social engagements [12]. The use of contraceptive methods helps women to delay unplanned pregnancies et child births so that they be engaged in several reproductive activities that not merely increase the family revenues but also create opportunities to them so that they can mo-
bilize different resources without waiting their husband’s contributions. This concurs with the study conducted in Ethiopia, where mothers who had an unwanted birth also had a poorer quality relationship with all their children, tending to spank them more and spend less leisure time with them or those from large families receive generally less education [14]. On the other side, participants revealed that irregular menstrual bleeding (94.0%) was the most disadvantage of using contraceptive methods (Table 3), causing the nonuse of the contraceptive methods. In his study, Alliance (2012) argued that women change most of time (27.27%) their previous method because of the prolonged bleeding [15].

6. Recommendations

The following are the recommendations from our study:

• Healthcare providers should teach women on reproduction age the types of contraceptives methods, its importance and the way it works to lead them of all myths and false information for awareness purposes,

• Churches’ leaders should provide to their members the true information related to the importance of using contraceptive methods and cooperate with the Ministry of Health to the wellbeing of people.

• Community healthcare workers to be trained well so that they give a proper information on the importance of using contraceptive, thus leading off all misunderstanding about contraceptive use.

7. Conclusion

This study revealed a significant knowledge as for all variables, participants were able to score more than 50%. Even though, factors which influence the women’s attitudes for not using contraceptive methods were noted in our study such as religion (73.0%) and fear (70.0%). It was explained by the fact that in Burundi most people are catholic which is the most religion prohibiting the use of contraceptive methods.

Limitations

The limitations were that our study was conducted in one hospital in a given period and the authors did not test the questionnaire’s validity or reliability.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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