INFLUENCE OF RADIO HEALTH MESSAGES ON MARRIED MEN TOWARDS FAMILY PLANNING: A THEORETICAL AND EMPIRICAL REVIEW

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Abstract

Radio as a genre of Mass Media has been proven effective in information dissemination on education, health, agriculture and other spheres of national development. Notable among the health-related messages disseminated through the radio is the adoption of Family Planning to serve as a mechanism for economic prosperity cum national growth and development. The study, therefore, examined the influence of Radio Health Messages on the knowledge, perception and attitude of married men about Family Planning in South Western Nigeria. This study explored the etymology of Family Planning and its meanings as given by scholars and authorities as well as the reviews of various contents as far as the concept of "family planning" is concerned. This study also harped on what Radio Health Messages are. A review of empiricals on knowledge and family planning, perception and family planning as well as attitude and family planning were also done from where conclusion and recommendations were aptly posited.

Keywords: Attitude, Knowledge, Radio Health Messages, Family Planning, Married Men

Introduction

Radio from time immemorial with its ubiquitous nature has served as a vehicle for canvassing national developmental issues (Oyedokun, 2014). It has generally been used to inform, educate, entertain and persuade. Such functions can as well be inferred from Adidi Uyo's (1987) PENIISE acronym of Media functions. The PENIISE acronym means; the media, radio in this context is used for, Persuasion function, Education function, News function, Information function, Interpretation function, Selling function and Entertainment function. Essentially, radio spans literary gaps, geographical distance, language barriers and remains an affordable source of information reaching a heterogeneous audience with ease (Odero & Kamweru, 2010).

In Nigeria, radio has been used to air many programmes and produced jingles. Among such was a programme titled "Flava". This programme was used to enlighten the people on the reality of HIV/AIDS. Also, a radio programme titled "'Story Story" on Radio Nigeria was used to enlighten the populace on the problems inherent in the society and possible way-outs (Piotrow, 2011).

In Health Communication, radio maintains a valuable role in disseminating health-related issues such as campaigns against HIV/AIDS, Immunization for children, Oral Dehydration Therapy, Fight against Malaria, Kick Out Polio, Wash your hand Campaign during Ebola outbreak in August, 2014, family planning adoption as well as the recent campaign against the spread of the novel COVID-19 in 2019/2020. The rampancy of these campaigns on both government and non-government owned media as sponsored by government and private individuals hinged on the increasing availability of radio sets and such campaigns are presented in form of news, jingles, dramas, or discussion (Kincaid, 1992).

As regards family planning campaigns, the Planned Parenthood Federation of Nigeria (PPFN) has overtime produced such health messages in the media both print (newspapers, magazine) and broadcast (radio, television). Notable among such health messages was the one aired on Nigerian Television Authority in August, 1987 titled "Wait for me" as produced by popular Nigeria artistes; King Sunny Ade and Onyeka Onwenu. From then till now, such health messages have been flooding the media waves. Presently in Southwest Nigeria, we have "Ilera Loro" (Health is wealth) on Osun State Broadcasting Corporation (OSBC), Health Check on Orange FM, Akure, "Ilera Loro" (Health is Wealth) on Family FM, Ogun state, "Se e ri gbo?" (Have you heard of it?) on Ogun State Broadcasting Corporation (OGBC), to mention but a few.

According to the World Health Organization (WHO), family planning is a practice which allows individuals and couples to anticipate and attain their desired number of children as well as the spacing and timing of their births. To United Nations Population Fund (UNFPA, 2001), Family Planning is a recognized basic human rights that enables individuals and couples to determine the number and spacing of their children while Iqbal (2013) posited that Family Planning does not imply absence of children but it is concerned only with low rate of reproduction and nothing un-natural and inhumane.

Myriads accounts and Schools of thought exist as to the evolvement of family planning. An account traces the beginning of family planning to an America female nurse Margaret Sanger who felt concerned about the rates of abortions and deaths and thus established the first birth control clinic at 46, Amboy Street in the Brownsville Section of Brooklyn, New York, on October 16, 1916. Her clinic was later closed down by the government and she was arrested for distributing information on contraception. Demonstrations by American women and subsequent appeals led to her release and a go-ahead to continue her pioneering work. In 1921, she founded the American Birth Control League, which later became the Planned Parenthood

Federation of America-The First Birth Control Clinics in America and England (First birth control clinics, 2013).

In Nigeria, traditional methods of family planning are as good as man and has been in existence from time immemorial. Efforts to get the modern family methods introduced into the country began in 1950s. A Marriage Guidance Council in 1958 established the first Family Planning clinic in Lagos with Dr. Adeniyi Jones in charge of the Ministry of Health managing the clinic which was then at Lagos city council. Later, family council began functioning under the umbrella of the National Council for Women Societies in Lagos (Family planning issues in Nigeria, 2019).

In promoting family planning in Nigeria, the Nigeria Government has had its maiden national policy on population promulgated in 1988 and later revised in 2004. In particular, a vital aspect of the population policy was to "reduce the number of children a woman is likely to have in her lifetime, now over six, to four per woman..." (NPC & Macro, 2004; NPC & ICF International, 2014). Besides, Nigeria had been organizing family planning conferences in the country. The biennial conference which is now the fifth of its kind started in 2010, the fourth edition was held between 7th to 9th November, 2016 with the theme: "Family Planning in Nigeria: The Journey So far" while the latest was the fifth one which held from December 3rd to December 6th, 2018. (Family Planning Conferences in Nigeria, 2018).

In the aspect of financing of family planning, the total cost expended on the Family Planning blueprint from 2013-2018 was US\$603 Million. Overall, US\$183 Million or 30.3 percent of the overall cost were for commodities, including contraceptives and consumables. In the aspect of media funding, US\$37,405,234 was expended on radio and TV broadcasting yearly, Advertising and Printed materials (promotion, billboard, poster, flyer, pamphlet and brochure) gulped US\$24,531,796 per year while US\$ 177,253,282 was spent on the purchase and provision of contraceptives (Male and female condoms, Combined Oral Pills, Progestin Only Pill, Injectable, IUDs Female and Male Sterilisation Consumables, among others), (FMOH, 2014).

Further to government's commitment to family planning, on the 12th of September, 2017, the Federal Ministry of Health under the former Minister of Health, Professor Isaac Adewole during the 5th Annual National Family Planning Stakeholders Consultative Meeting in Abuja launched a new family planning campaign called "Green Dot"" Initiative. This re-launch became necessary as it was entrenched in the Economic Growth and Recovery Plan (ERGP) unveiled by President Muhammadu Buhari that Nigeria must adopt a strategic approach to manage our scary population growth which has been predicted to double by the year 2050. This will make the country the third most populous nation in the world with about 400 million people if not seriously curtailed.

Sequel to the re-launch of Green Dot Initiative, the Director Media Relations Federal Ministry of Health, Mrs. Boade Akinola called on the Media to help push family

planning issues to the mainstream agenda while addressing the misconceptions about family planning by educating people on the benefits and to specially promote empathy and understanding among the men. The media are accused of targeting family planning messages at women alone whereas men too are necessary determinants in family planning adoption.

It is against this backdrop, that the researcher is interested in finding out the influence of radio health messages on knowledge, perception and attitude of married men towards family planning in South West Nigeria considering family planning as a measure of birth control to help curtail Nigeria's fast growing population.

Statement of the problem

Concerns about increasing population growth, high birth rate and low contraceptive usage in Africa, have stimulated policies and programmes aimed at promoting family planning practice in Africa and Nigeria in particular. Substantial monetary efforts, time and programmes have been committed towards educating Nigerians about the advantages of fewer children over plenty and motivating them to adopt family planning practice via mass media, especially the radio using news, episodic dramas, jungles and discussions.

Despite efforts by the government, non-governmental organisations, and media, the population of Nigeria continues to increase at an alarming rate. Among the signs of overpopulation in Nigeria according to Victor (2018) is unemployment, inadequate tertiary institutions to cater for the teeming youths, lack of medical facilities, low per capital income, and environmental deterioration, among others. One of the viable measures to curtail overpopulation is the adoption of family planning.

To this end, this study is motivated by the alarming population growth of Nigeria and the clarion call by the Federal Ministry of Health through the Green Dot Initiative that the media should help shift focus of family planning messages directed at women solely to men as well. The media should avail the men with adequate knowledge about family planning while addressing their misconceptions about it. In this regard, this study intends to investigate the influence of Radio Health Messages on the knowledge, perception and attitude of married men about Family Planning in three states in South West Nigeria.

Literature Review

Radio Health Messages

Health communication is a broad term that means different things to different people. Scholars have defined and described health communication from different perspectives. This is because like most concepts, there is no universal definition but perspectives that define health communication. Sixsmith (2017), defines health communication as the study and use of communication strategies to inform and

influence individual and community decision that enhance health. It encompasses health promotion, health protection, disease prevention and treatment, and is pivotal to the overall achievement of the objectives and aims of public health.

According to Akinfeleye (2016), health communication basically could be described as the form of communication disseminated by the mass media for adequate health care delivery office. Hence, it will be right to assert that media health communication is the dissemination of health information by the media in order to influence people's' health choice and improve their health literacy for sustainable health development. As a concept, media health communication seeks to: increase audience knowledge and awareness of health issue, influence behaviours and attitudes towards a health issue, demonstrate healthy practices, demonstrate the benefits of behavior changes to public health outcomes, advocate a position on a health issue or policy increase demand or support for health services, and argue against misconceptions about health.

Radio health messages consist of speech, music or other sounds. These sounds are either live or prerecorded. Live sounds are broadcast at the same time they are produced and include words spoken by announcers. Pre-recorded sounds are not broadcast when first produced. They are stored on tapes and broadcast later. Almost all the music and most commercials/advertisements are prerecorded (Uyeh, 2017). There are different strategies for health communication. These methods include campaigns, entertainment advocacy, media advocacy, new technologies, and interpersonal communication. All these strategies are used to enhance effective dissemination of health-related issues.

Family Planning

Family planning is an important strategy in promoting maternal and child health. It improves health through adequate spacing of births and avoiding pregnancy at high risk maternal ages and parities. Family planning is defined as the ability for individuals and couples to attain their desired number of children and plan the spacing and timing of their births through use of contraceptive methods (WHO, 2018).

Family planning (FP) is defined as a way of thinking and living that is adopted voluntary upon the bases of knowledge, attitude, and responsible decisions by individuals and couples (Oyedokun, 2017). Family planning refers to a conscious effort by a couple to limit or space the number of children they have through the use of contraceptive methods (Gaur, Goel & Goel, 2018). Family planning deals with reproductive health of the mother, having adequate birth spacing, avoiding undesired pregnancies and abortions, preventing sexually transmitted diseases and improving the quality of life of mother, fetus and family as a whole (Handady, Naseralla, Sakin & Alawad, 2015).

Family planning has been identified by the World Health Organisation (WHO) as one of the six essential health interventions needed to achieve safe motherhood and by United Nations Children Fund (UNICEF) as one of seven strategies for child survival.

Both women's and men's use of contraception has been going on for centuries. Traditional methods such as coitus interruptus is described in the Bible, periodic abstinence was used in ancient India and the precursor to the condom was used by the Egyptians back in 1350 BC. Visaria (2015) stated that family planning programme has evolved through a number of stages, and has changed direction, emphasis and strategies; during the first decade of its existence, family planning was considered as a mechanism aimed at improving the health of mothers and children than a method of population control.

There are five different groups of family planning methods including, barrier methods, hormonal methods, emergency contraception, intrauterine methods, sterilization (Planned Parenthood Federation of America, 2016).

Barrier Methods are designed to prevent sperm from entering the uterus. Types of barrier methods include: male and female condoms and diaphragms. Condoms prevent pregnancies as well reduce the risk of spreading sexually transmitted diseases (STDs). Diaphragms are shallow, flexible cup made of latex or soft rubber that is inserted into the vagina before intercourse, blocking sperm from entering the uterus (Allen, 2004). Other barrier methods include cervical caps, contraceptive sponges and spermicides. These are also barriers to sperm reaching uterus (American College of Obstetricians & Gynecologists, 2011).

Hormonal methods of birth control use hormones to regulate or stop ovulation and prevent pregnancy. Ovulation is the biological process in which the ovary releases an egg, making it available for fertilization. Hormones can be introduced into the body through various methods, including pills, injections, skin patches, transdermal gels, vaginal rings, intrauterine systems, and implantable rods. Depending on the types of hormones that are used, these pills can prevent ovulation; thicken cervical mucus, which helps block sperm from reaching the egg; or thin the lining of the uterus. Health care providers prescribe, monitor, and administer hormonal contraceptives (National Center for Biotechnology Information, 2015). Intrauterine methods; An IUD is a small, T-shaped device that is inserted into the uterus to prevent pregnancy. A health care provider inserts the device. An IUD can remain and function effectively for many years at a time. After the recommended length of time, or when the woman no longer needs or desires contraception, a health care provider removes or replaces the device. There are two types of intrauterine method; Copper IUD which acts by releasing a small amount of copper into the uterus, causing an inflammatory reaction that generally prevents sperm from reaching and fertilizing the egg. The hormonal IUD releases a progestin hormone into the uterus. The released hormone causes thickening of the cervical mucus, inhibits sperm from reaching or fertilizing the egg, thins the uterine lining, and also may prevent the ovaries from releasing eggs (Food and Drug Administration, Office of Women's Health. 2011).

Sterilization is a permanent form of birth control that either prevents a woman from getting pregnant or prevents a man from releasing sperm. This procedure is performed by health care provider and usually involves surgery. These procedures usually are not reversible. Sterilization includes; sterilization implants which is a nonsurgical method for permanently blocking the fallopian tubes (Conceptus, 2012). Tubal

ligation which is a surgical procedure involving the cutting, tying or sealing of the fallopian tubes to block the path between the ovaries and the uterus preventing sperms from reaching the egg. Vasectomy is a surgical procedure that cuts, closes, or blocks the vas deferens hence blocking the path between the testes and the urethra blocking sperm from leaving testes (National Library of Medicine, MedlinePlus, 2012).

Knowledge of Family Planning

According to Bankowski & Bryant (2017), knowledge refers to the capacity of acquiring, retaining and using information which is a mixture of comprehension, experience, discernment and skill. Knowledge within the context of this study refers to what the research subjects know about natural family planning, how they first come to be aware about natural family planning and the various methods of natural family planning known to them. Knowledge is a familiarity, awareness, or understanding of someone or something, such as facts, information, descriptions, or skills, which is acquired through experience or education by perceiving, discovering, or learning. Knowledge can refer to a theoretical or practical understanding of family planning. The use of any family planning method depends on the person's knowledge of the different family planning methods available and the willingness of both spouses to participate in the family planning programmes.

The sources of information are also important because they determine, to some extent, the numbers and characteristics of people reached, the quality and quantity of information diffused, and the effect which information may have on recipients (Gadalla, 2013). The majority of African men know at least one family planning method, either modern or traditional. In a number of countries, such as Egypt, Morocco, Kenya, Rwanda and Zimbabwe, knowledge of family planning among men is nearly universal (Olumide, 2016).

Knowledge of family planning, family planning methods, and related issues comprise an essential component of the decision to using a contraceptive method. Individuals with higher levels of knowledge about family planning and family planning methods are more likely to be using contraceptives than those with lower level of such knowledge (MacCorquodale, 2015).

Perception of Family Planning

Men and women can be influenced even more by their perception of community norms than by their personal preferences concerning their ideal number of children and contraceptive use. (Russell & Pratt, 2015). Perception can be defined as the process by which someone becomes aware, understands and interprets something. Since individuals hear a lot of health programmes on radio every day, information processing goes through some perceptual defences, which are the elective attention, selective perception and selective retention. It allows them to "sort" the information received depending on their own beliefs, values and attitudes. If the radio health messages hold the interest of the individual, he/she will most likely think about the

message, keep it in memory and that can result to adherence to family planning (Russell & Pratt, 2015). Perception can also be defined as the process by which organisms interpret and organize sensation to produce a meaningful experience of the world. (Belch & Belch 2014). It is an individual process and depends on internal factors such as person's experiences, beliefs, moods, attitude, needs and expectations. The perceptual process is also influenced by the characteristics of a stimulus.

According to Fennell (2017), perception is a mental process. It involves an effort made by an individual to select, organize and interpret radio health messages input to create a meaningful picture of the subject, event, proposition, etc. Fundamentally, perception has a relationship with how individuals create opinions about radio health messages offered by health practitioners, which they engaged in or not. Then, it is very important that individuals have good perceptions of radio health messages, especially on family planning since it will have a direct impact on their decision making process (Fennell, 2017).

Attitude towards Family Planning

Attitude refers to inclinations to react in a certain way to certain situations; to see and interpret events according to certain predispositions, or to organize opinions into coherent and interrelated structure (Bankowski & Bryant, 2017). In this study, attitude refers to the views and opinions of the couples or research respondents on natural family planning methods: whether they find it acceptable or not; whether they support, like and encourage it or not. Attitudes are not gained by birth, they are learned and adopted by experiences and culturally gained during socialization.

Essentially, the identification of attitudes that affect the use of the family planning method by individuals is an important factor contributing to the scheduling of family planning services (Abimbola, 2016). The basis of most attitudes depends on childhood development and is generally acquired through direct experience, reinforcement, imitation and social learning. The most important feature is that once they have developed, they are very resistant to change (Oyedokun, 2015). Studies conducted in different countries have found that most women know the methods of family planning but do not practice it. This is due to the fact that they have a negative and prejudiced attitude toward modern methods. It is known that positive or negative attitude affects the use of family planning method, so, it is important to examine the current attitudes and determinants in order to spread the choice of effective method (Oyedokun, 2015).

Notably, individuals' attitudes for family planning methods are influenced by some characteristics, such as economic factors, socio-cultural factors, environmental factors, location, age, educational, traditional beliefs, religion, family type and level of knowledge (Oyedokun, 2015). Further to this, many anthropologists have insisted that reproductive behavior or decisions made in relation to family planning is not only decided by economic factors, but also affected by socio-cultural factors such as

fertility preferences or values related to having children. Likewise, political issues such as national population policy or reproductive health programmes, are also influential matters. Subsequently, anthropologists emphasize that it is very important to understand what social, cultural or structural factors may shape peoples' thoughts and behaviors (Ofonime & Ikobong, 2015).

Empirical Review

Radio Health Messages and Family Planning Practices

Previous research has indicated that mass media, especially radio stands to be the most accessible and affordable media in rural setting and even, it is ubiquitous in the urban setting. Thus, it must be extensively used to promote the use of family planning method (Mghweno, Katamba & Nyirabavugirije, 2017) and according to Oberiri (2017), women in Jalingo metropolis are aware of family planning as propagated in the media but they do not practice it. The study examined some family planning methods such as the use of injections, pills, condoms among others using a randomly selected 200 married women which formed the sample size of his study whose opinions were sampled through the instrumentation of questionnaire. After using SPSS software to analyze the data retrieved from the field which was later presented in tables, Oberiri (2017) concluded that religion and cultural beliefs dissuaded women from practicing family planning in Jalingo, Northern Nigeria despite being exposed to Radio Health Messages on radio.

Affirming this, Mghweno, Katamba & Nyirabavugirije (2017), in their study which explored the influence of mass media on family planning methods use among couples in Gashenyi Sector revealed that the level of listening to radio was high, whereas that of reading posters, watching TV and reading newspapers were very low. The study was conducted in two health centres using 351 couples including heads of health centers and their executive secretary of the sector. After analyzing the data using description statistics and Pearson Product Correlation to determine the usage of family planning methods and influence of mass media strategy on the adherence to the methods, respectively, it was revealed that the usage of family planning methods in the area were generally low. This invariably means that mass media health messages do not influence them despite the high listenership to Radio Health Messages on Family Planning among the respondents.

In agreement, Chukwuedozie, Clifford, Ijeoma & Chidiebere (2016) while looking at the relationship between access to mass media messages on family planning and use of family planning in Nigeria affirmed that the relationship between each of the respondents' claimed access to mass media messages, and the family planning variables after being determined with Pearson correlation analysis showed weak direct relationships between the access to mass media health messages and use of family planning. The study used data of 2013 Demographic and Health Survey of Nigeria that was conducted in all the 36 states of Nigeria including the Federal

192 NFLUENCE OF RADIO HEALTH MESSAGES... Volume 5, Number 1,2020

Capital Territory. The sample was weighted to ensure representativeness while univariate, bivariate and binary logistic regressions were conducted. Chukwuedozie, Clifford, Ijeoma & Chidiebere (2016) affirmed that there exist significant variations within Spatio-demographic groups with regards to having access to mass media messages on family planning, and on the use of family planning. However, they concluded that access to mass media messages increases the likelihood of the use of family planning while people with higher socioeconomic status and those from the Southern part of the country were shown in the findings as those with high use of family planning in Nigeria.

Contrary to the above, a study by Dana (2018) indicated that mass media-delivered family planning campaigns have a positive impact on family planning behaviors. Effect sizes were consistent with previous research on the impact of mass media-delivered campaigns. In the study titled "The impact of mass media-delivered family planning campaigns in developing countries: A Meta-analysis", the Meta-regression analysis also indicated that for women, mass media family planning campaigns that included an entertainment-education component were positively related to family planning behaviors as well as campaigns that prompted subsequent interpersonal communication with healthcare workers.

Contrasting between the effect of radio health messages on family planning and effect of such messages on television, Nazim & Hakim (2015) in their study titled "the effect of TV and radio family planning messages on the probability of modern contraception utilization in post-Soviet Central Asia", they evaluated the effects of family planning message broadcast on radio and TV on the probability of modern contraception utilization in post-Soviet Central Asia. Findings revealed that viewing family planning messages on TV improves the chances of using modern contraception for a woman who actually saw the messages by about 11 and 8 per cent in Kyrgyzstan and Tajikistan, respectively. They further suggested that, if every woman in Kyrgyzstan and Tajikistan had an opportunity to watch a family planning message on TV, then the likelihood of using modern contraception would have improved by 10 and 7 per cent in Kyrgyzstan and Tajikistan, respectively. By contrast, the effect of hearing family planning messages on radio in both countries was found to be insignificant.

Negating the findings of Nazim & Hakim (2015), Uprety, Ghimire, Poudel, Bhattrai & Baral (2017) revealed that radio was the main Source of family planning information and it was effective.

On the impacts of varied radio format in propagating the use of family planning, a study of Jacqueline, Hellen & Margaret (2017) on effect of interactive radio platforms on family planning comprehension in Kigali City assessed the level of audience participation to the Comprehension of family planning in Kigali city and they also analyze the effect of radio content to the Comprehension of family planning in Kigali city. Results showed that audience participation and radio content are significantly

influential to the comprehension of family planning while radio content alone was not significant. Furthermore, there is a positive and significant effect of interactive radio broadcast content and drama format on the comprehension of family planning programs in the selected radio stations and radio programs among the population of Kigali City.

Knowledge and Family Planning Practices

Knowledge of family planning practice has been widely researched. Knowledge of family planning has a significant bearing with the literacy level of spouse. Thus, these aspects need to be duly addressed to bring about improvement in the reproductive health of women and knowledge of family planning practices (Sindhu & Angadi, 2016). According to Ofonime & Ikobong (2015) knowledge of family planning methods was high among the women but their use was relatively poor. The study examined knowledge, attitude and practice (KAP) of family planning (FP) among women of child bearing age in a clan in Abak, Akwa Ibom State, Nigeria. They used structured interview guides and semi-structured questionnaire to examine the socio demographic characteristics and KAP of family among women of child bearing age (15-45 years) which were selected through multi-stage sampling method. It was discovered that, there was a significantly positive association between educational qualification and use of family methods but its usage was relatively low.

Agreeing with the low level of adoption despite knowledge of family planning, Muhammad & Farahnaz (2018) while studying the knowledge, attitude, and practice of family planning methods among married men and women in Karachi community, Pakistan using a cross-sectional survey design revealed that most of the men and women have comprehensive knowledge and assertive attitudes regarding the use of contraceptive methods, however, the practice of family planning methods is still low. In the study, two hundred participants were recruited, including 72 men and 128 women who were interviewed regarding their knowledge, attitude, and practices of family planning methods through a predesigned questionnaire. A two-stage sampling technique was used including systematic and convenient sampling to collect the data. Women with infertility, non-reproductive age (49 and above), widows, and widowers, separated and divorced individuals were excluded from this study. Results of the study showed that majority of the participants had knowledge of few contraceptive methods, but they lack awareness about all the family planning methods. Thus, the usage level was low.

Supporting this view, Deepti, Lal & Kaur (2015) while studying knowledge and practice of contraception and its association between contraceptive practices and different socio-demographic variables and to elicit factors behind lack of contraception, noted that Knowledge about different contraceptive methods was present among majority of respondents but only few respondents were found to be using contraceptive method at the time of study. The study was a cross-sectional study conducted in 1600 houses selected randomly in four slum areas of Amritsar city

in which 1641 married women were found in the reproductive age group (15-49 years) and thus, adopted as the sample size. Those few had the highest adopting tubectomy as permanent sterilization method as followed by oral contraceptives, condom, intrauterine device, traditional methods, injectable, emergency contraception and vasectomy respectively. The study finally revealed that the use of contraceptive methods increased with increasing age, number of living children and level of literacy. Going against number of living children as a variable for adopting family planning, Alade (2012) in his study on the determinants of family planning among married people in Lagos state noted that all the determinants of family planning correlated significantly with married peoples' perception of family planning except child spacing with moderate relationship.

Similarly, Sindhu & Angadi (2016) asserted that there are various socio-demographic factors affecting the KAP of FP methods among women. These aspects need to be duly addressed to bring about improvement in the reproductive health of women. The study assessed the KAP about FP methods among reproductive age group women attending a private tertiary care institute. The design of the study was cross-sectional study. Patients attending Obstetrics and Gynecology Department, BLDE Hospital, Vijayapura were taken as the study population. The study duration was 15th January to 15th February 2016. Data collection methodology was in the form of interview technique, using a pre-designed, pre-tested questionnaire. A total of 110 patients attending out-patient department were interviewed. Women aged more than 25 years, residing in urban areas, belonging to joint families had significantly higher knowledge about FP methods. Positive attitude toward FP methods was more among women who were Hindu by religion.

Perception and Family Planning Practices

Perception of parents-mother or father goes a long way to ascertaining the level of family planning practice acceptability in the family. Husbands are major determinants of whether to adopt family planning practice or otherwise (Dauda & Apuke, 2016) and according to Taranga & Gambhir (2014), adopting low family planning methods among couples was mainly due to husbands' disapproval thinking that it may cause family disharmony, religion prohibition and fear of adverse effects. The research studied community perceptions of family planning among eligible couples in an urban slum of Hatta area of Imphal East district, Manipur. The study assessed the knowledge, attitude and practices of family planning among eligible couples. A cross sectional study was used. 825 eligible couples participated in the study with a response rate of 99.28%. Mean age at marriage of wives and husbands were 19.12 and 24.14 years respectively. Majority of husbands and wives knew of family planning and media was the main source of information. 54.42% of husbands disapproved family planning and only 16.73% of the couples were using family planning methods. Logistic regression analysis revealed that one year increase in age of wives has a likelihood of having 4% increases in adopting family planning methods. Similarly, occupations of wives other than housewife had 27% and from illiterate to literate 3%

more chance of adopting family planning methods. The study thereafter concluded that husbands' disapproval, in addition to other important associated factors such as their attitude, education and occupation affect their perception on family planning.

Supporting this view, Dauda & Apuke (2016) in their study to ascertain the perception and attitude of married women aged 18-45 in selected 5 wards out of the 12 wards in Ardo Kola namely Ardo Kola, Jauro-Yinu, Jiru, Lamido-Borno, Mallum on the practice of family planning revealed that married women in Ardo Kola Local government are aware of family planning/method but do not practice family planning because their husbands are not favorably disposed to the practice. The study recommended that Husbands in Ardo Kola should be enlightened properly by health care providers on the benefits derivable from family planning, and the attendant socio-economic and health problems where the practice is ignored. The research deployed multi stage technique using questionnaires and data collected were analyzed using simple percentage, frequency distribution and Microsoft excel chart analysis.

Opposing this view, Zenebe (2017) asserted that the level of awareness on family planning was high and as such, nearly half of the respondent couples approve contraceptives with more approval of women in both settings. In the study to assess perception of couples towards family planning and its relevance to environmental sustainability and factors hindering family planning practice, Zenebe (2017) used sample size which comprised of 90 couples in rural and 28 in urban. Data was collected by using random systematic and simple random sampling methods. The instruments used for data collection were interview and focus group discussion. The research found that there is promising level of awareness on family planning and main source of information were health extension agents. Reported reasons in sought of large number of children were old age support, son or daughter preference, considering children as a wealth, and labor support, religious prohibition. Furthermore, findings of Zenebe (2017) showed that half of the rural and nearly less than half of the urban respondents approve the importance of family planning for environmental sustainability. During the study period, 23.2% of urban and 18.9% of rural couples were using some method of family planning; among which 21.4 of urban and 16.7% of rural women were using modern methods, hence, awareness level and practice in family planning showed a gap in both urban and rural. In general, urban showed more favorable attitude and practice than rural couples in family planning. Despite of their lower practice in family planning, rural respondents likely showed more favorable attitudes towards relevance of family planning for environmental sustainability.

Attitudes and Family Planning Practices

A lot have been written on attitude to family planning amid the factors associated with the practice of FP as a consequence of such attitudes. In the work of Ayele, Mulu & Nebyat (2018), residence, marital status, educational status, attutude, knowledge, number of children, occupation, age, and average monthly household income of participants were factors associated with the practice of FP. The study was carried out

on "Knowledge, attitude and practice towards family planning among reproductive age women in a resource limited settings of Northwest Ethiopia". They assessed from the data gathered that the level of knowledge and attitude towards family planning as well as the level of family planning utilization was quite low in comparison with many other studies. The study showed that the peak of attitude, desirable knowledge, as well as practice of women towards family planning (FP) was 42.3%, 58.8%, and 50.4% respectively.

Supporting the view of Ayele, et al (2018), Abiodun & Ohonsi (2016) asserted that the use of family planning methods was significantly associated with respondents' ethnicity, occupation, and level of education. Women without formal education have 2 times higher odd ratio of embracing family planning. In their study on the level of awareness of family planning methods among women attending antenatal care, its uptake, and predictors of use, they employed a descriptive cross-sectional study to carry out the suvey at the antenatal clinic of Federal Medical Centre, Birnin Kudu, Jigawa state, Nigeria. They used an interviewer administered questionnaire to assess the awareness and practice of family planning methods among 350 pregnant women from June 19, 2012, to August 26, 2012. The selection was through a systematic sampling technique using logistic regression analysis to adjust predictor variables as well as to assess the relative effect of determinants. Of the 350 respondents, 319 (92%) had heard of family planning, of which 29% had ever used a method and the injectable were the most common method used. The use of family planning methods was significantly associated with respondents' ethnicity, occupation, and level of education (P \leq 0.05). The odds ratio of not using family planning methods was 2 times higher in women with informal education (adjusted odds ratio = 2.12; 95% confidence interval = 1.1-3.8). In conclusion, awareness of family planning methods was high among the respondents surveyed, but the utilization was poor. As a suggestion, female education and empowerment was suggested as means to promote positive attitude to family planning practice in this setting.

In agreement, Anyanwu, Ezegbe & Eskay (2013) found out that educational status has positive influence on family planning. The study investigated the extent of family planning, the methods and contraceptive devices in use and the influence of education on family planning among couples in Nkanu Local Government Area of Enugu State.

In support, Monisola (2015) in her study titled "Knowledge, Attitude and Practice of Family Planning among Healthcare Providers in Two Selected Health Centres in Osogbo Local Government, Osun State", showed that a good number (98%) knew about family planning and more than half (68%) of the respondents use family planning themselves. The study assessed the level of knowledge and attitude of healthcare providers towards family planning; to determine the extent to which the healthcare providers practice the family planning methods. The result showed that a good number (98%) knew about family planning while about 44% of them knew all the methods listed in the questionnaire. The result also showed that the healthcare providers indicated different attitudes to family planning methods such that 77.6%

believed that family planning does not make users promiscuous contrary to 22.4% of the respondents that believed it makes them promiscuous. It was concluded that intensive in service training, seminars/conference and other forms of enlightenment programmes on all methods of family planning should be put in place, such that they will be able to practice methods best suitable for them.

Conclusion

This study has succeeded in tracing the etymology of family planning and the usefulness of radio as a veritable genre of media in passing across health related messages. It is seen that family planning is concerned only with low rate of reproduction and nothing un-natural and/or inhumane. In Nigeria, radio has been variously used at different points in time to propagate health policies, ranging from, Immunization, Kick out Polio, fight against Malaria, family planning adoption to the recent teaching on the best practices on how to avoid contracting the dreaded novel COVID-19 pandemic. This underscores the need for radio to help as being clamoured for by the Federal Ministry of Health, to carry the messages on the essence and benefits of family planning to the men, not solely to women. This is because radio has the wherewithal to effect desired attitudinal changes in men as seen in what they have been used for earlier. To this end, this study with the various reviews done concludes that Radio Health Messages (RHM) can have a positive influence on the knowledge, perception and attitude of married men about Family Planning in South Western Nigeria if properly channeled.

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198 INFLUENCE OF RADIO HEALTH MESSAGES... Volume 5, Number 1,2020

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