

# Spousal Communication and Family Planning Utilization in Anambra State, Nigeria

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DOI: <https://dx.doi.org/10.51244/IJRSI.2025.1210000174>

Received: 10 October 2025; Accepted: 20 October 2025; Published: 14 November 2025

## ABSTRACT

The need to explore the nexus between spousal communication and family planning utilization especially in the developing world cannot be overemphasized. Studies show limited male involvement in family planning programs in the developing worlds including Nigeria. Which negatively affects spousal communication about family planning activities leading to low family planning utilization. Few researches have been carried out on spousal communication and family planning utilization among couples in the study area. This is the gap in knowledge which this study filled. The study investigated Spousal communication and family planning utilization among couples in Anambra state using cross-sectional survey design. The Health Belief Model provided the framework for the study. The target population for this paper is 2,049,924 married men and women in the study area, Using Taro Yamane formula to derive the sample size of 400 respondents for this study, also hypothesis was tested using the Chi-Square ( $\chi^2$ ) statistics. Structured questionnaires and In-depth interviews comprised the instruments for the data collection. Findings show that, family planning is not optimal in the study area, as only a few respondents are using both medical and non-medical methods of family planning, especially the Billings ovulation method probably due to religious beliefs. On the other hand, spousal communication about family planning issues was found to be in limited practice. Family planning utilization was found to be higher among couples that engage in family planning communication. There should be intensive sensitization programs on family planning programs and strengthening spousal communication in the study area. Also, male involvement in family planning should be encouraged.

**Keywords:** Spousal communication, Family Planning utilization, Anambra state.

## INTRODUCTION

In recent times, there seems to be a significant link between spousal communication and family planning utilization especially in the developing world. It is estimated that about two hundred and twenty-five million women in developing countries would like to delay or stop child bearing but they are faced with many challenges like fear of side effects of contraception, limited choice of method, gap in spousal communication, social network influence etc, (World Health Organization, 2015). Family planning has continued to attract attention to mankind due to its relevance in fertility decision making, population growth and development in the society. The World Health Organization (2011) defined family planning as the practice that helps individuals or couples to attain certain objectives such as avoiding unwanted pregnancies, regulating the interval between pregnancies, controlling the time at which birth occurs in relation to the ages of the parents and determining the number of children in a family.

Ogunjuyigbe et al., (2009) contended that most men lack family planning information and this has resulted in gap in spousal communication on issues relating to family planning. Massenga et al., (2021) noted that in Tanzania, women who had discussed about family planning with husband were about three times more likely to utilize family planning when compared to women who do not discuss about family planning with their spouses, thus involving male partners in issue about family planning provides an opportunity for couples to discuss about family planning. Most couples perceived use of family planning as beneficial but evidence reveals that majority do not use it, for instance in Nigeria the reason for non-utilization include desire for more

children, fear of side effects, religion etc. Irrespective of wide range of contraceptives to prevent unwanted pregnancies made available by the US food and administration, it is still evident that unplanned pregnancies affect millions of women globally (Michelle et al., 2016). Adanan et al., (2021) stated that spousal communication has a positive impact on the adoption of family planning practices, it is a crucial strategy to involve males in family planning and other fertility issues, which also increases the possibility of supporting women's decision about their preferred family planning methods.

In Nigeria the use of family planning is low, contraceptive use ranges from as low as 3% among married women in North East Zone to 38% in the South West Zone (National Population Commission Nigeria & International Children Fund, 2013). The percentage of married women that use contraceptives in Nigeria, evidence from 2018 Nigeria demographic and health survey are, Southeast 21.0%, Southwest 26.2%, Southsouth 20.6%, Northeast 8.4%, Northwest 5.7% and Northcentral 13.3% (Ukoji et al., 2022). Considering the above data which revealed low percentage of married women that use contraceptive in the southeast Nigeria this study investigated Anambra as one of the states in the southeast. Thus, Nigeria is one of the most populous nations in the world with about 234 million inhabitants, growing at a rate of approximately 2.10% yearly (worldometer, 2024). It is estimated that about 43% of unwanted pregnancies occur in low and middle-income countries as a result of nonutilization of family planning methods these countries also record about 18 million unsafe abortions (Getaneh et al., 2020).

It is against this background, that this paper investigated Spousal communication and family planning utilization in Anambra state, Nigeria.

## LITERATURE REVIEW

Various literature has views on spousal communication and family planning utilization. Invariably, family planning has continued to be a matter of concern to humanity due to its relevance in making decisions about population increase in societies especially in developing countries. A study conducted in China on Association between factors related to family planning/sexual and reproductive health and contraceptive use, as well as consistent condom use among internal migrant population of reproductive ages in three cities in China, among 5,760 participants by Shuang-Fei et al. (2014) found that communication frequency with spouse/sexual partners on sex, actual number of children and knowledge on sexual reproductive health affect both contraceptive use and consistent condom use. A research in Democratic Republic of Congo conducted by Muanda et al. (2017) on Barriers to modern contraceptive use in rural area in DRC, among 24 focus group of men and women, the key barriers that emerged were poor spousal communication, socio cultural norms etc. These findings show that family planning programmes must address shared understanding and decision making among rural men and women in order to improve family planning use.

Similarly, another research on relationship, characteristics and contraceptive use among couples, conducted in three Kenyan cities among 883 couples, by Irani et al. (2014) revealed that among couples in which both partners reported spousal communication about family planning in the past six months had greater likelihoods of contraceptive use compared with couples in which partners agreed that they had not discussed family planning. A study conducted by Mosha and Ruben (2013) on communication, knowledge, social network and family planning utilization among couples in Mwanza, Tanzania; using 440 women noted that there exists a low level of communication between spouses about family size and family planning. Also, Fagbamigbe and Ojebuyi (2017) conducted a study on influence of spousal communication on family planning and HIV/AIDs related issues on modern contraceptive use in Nigeria, among 30,752 men and women, the study found that number of respondents who had spousal communication on family planning and HIV/AIDs was low and this has resulted to decline in number of couples using family planning in Nigeria.

Another study conducted by Ankomah et al. (2011) on myths, misinformation and communication about family planning and contraceptive use in the six geopolitical areas in Nigeria using 20,171 respondents revealed that respondents who discussed family planning with their spouse were more likely to use contraceptive than those who discussed with religious leaders. According to Adanan et al. (2021) husbands are

key decision makers in matters like family planning and as such communication between spouses is vital in the adoption and continuation of family planning utilization. In another study conducted by Izugbara et al. (2010) on gendered interests and poor spousal contraceptive communication in Islamic Northern Nigeria, using Focus Group Discussion and In-Depth Interview with men and women in Jigawa and Kano State, it was revealed that poor spousal contraceptive communication in Northern Nigeria is in many ways driven by the inspiration that husband and wives have to keep having children. Kiran and Zia (2024), stated that in order to accept any new idea in Pakistan interpersonal communication need to be established first, this also supports the need for spousal communication on issue of family planning to enable its utilization. In the past it has been the belief of people of Ethiopia and many other nations of the world that fertility issue is centered on women but recently men's attention has been drawn on their roles concerning reproductive behaviours and right parenting (Adane et al., 2024).

According to Osuafor et al. (2023) the involvement of men in decision and communication on reproductive health is vital and the low involvement of men in nations like Malawi and Tanzania has been of negative effect on the utilization of family planning among couples, thus men are advised to encourage and support their wives to receive improved healthcare. Low male involvement could be a result of the patriarchal nature of many African societies, few male family planning methods and misconceptions about family planning utilization (Koffi et al., 2018). Amuzie et al. (2022) stated that in Abia state men who were actively involved in discussing family planning with their spouses who also take decisions jointly were more likely to use family planning than men who solely take decision. Peter-Kio (2021) argued that in river state, because men are heads of households they make decisions that can impact on the lives of their family members including the uptake of family planning by their wives. Many women are discouraged from family planning utilization as a result of some factors like lack of spousal communication, lack of consent and spousal objection (Akaba et al., 2016).

Cultural and religious myths, poor spousal communication and lack of support by men in rural areas of Ebonyi state were deterrent to family planning utilization, thus debunking these myths and improving spousal communication will lead to uptake (Akamike et al., 2020). Married women in Enugu state who discuss their desire to use family planning methods like contraception with their husbands are more likely to be supported by their husbands to use family planning (Ezeanolue et al., 2015).

## **THEORETICAL FRAMEWORK**

### **Health Belief Model, Spousal communication and Family planning**

Health belief model is one of the most widely applied theories of health behavior (Glanz & Bishop, 2010). This theory was developed by Rosenstock. in the 1950's, and later by Becker, Godfre Hochbaum, Stephen Kegeles and colleagues throughout the 1970s and 1980s. Health belief model posits that particular beliefs were taught in order to make behaviours more or less attractive. Early research found that these health beliefs were indeed correlated with differences in health-related behavior patterns and so could be used to differentiate between those who did and did not undertake such behaviours. Also, as one of the most widely applied theories of health behavior, Glanz and Bishop (2010) stated that Health Belief Model posits that six constructs predict health behavior which are:

**Perceived Susceptibility:-** Glanz et al. (2008) stated that individual who perceive that they are susceptible to a particular health problem will engage in behaviour to reduce their risk of developing the health problem. Thus in response to health threat, an individual would have his/her own perception of likelihood of being affected by a health issue. Threat perception plays an important role to trigger an individual's motivation to engage in a health behaviour to avoid the adverse condition. The couples at high level of susceptibility would experience a sense of fear and communicate about family planning in order to avoid the adverse condition of uncontrolled birth, these couples have high possibility to adopt a protective action.

**Perceived Severity:-** The degree of seriousness of a health problem is perceived differently among individuals. According to Marcelo (2020) perceived severity investigates the personal belief regarding

individual suffering from the disease, process and intensity of symptoms. An individual who believes in the severity of a health problem will likely take up a preventive action to avoid the negative consequences. Thus couples who perceive the negative effects of uncontrolled birth, for instance infant mortality and maternal mortality, unwanted pregnancies, pregnancy complications etc. will adopt family planning method in contrast to couples who do not perceive it.

**Perceived Benefits:-** This refers to an individual's assessment of the value or the efficacy of engaging in a health promoting behavior to decrease risk of disease. Perceived benefits refers to the evaluative values or sense of efficacy that arises when engaging in health promoting behavior to reduce disease risk (Sunhee & Seoyong, 2020). Therefore an individual will only take a health-related behavior if he/she perceived great benefit for taking such action. Similarly, couples who assess the value of family planning will adopt family planning method, while another couple who do not consider the usefulness of family planning will not adopt family planning method.

**Perceived Barriers:-** This is the individual's perception of obstacles to a particular behavior change. Despite the fact that a certain action will be beneficial for avoiding a health problem, the individual may perceive difficulties in performing such behaviour as a result of some negative aspects for carrying out the health behavior. According to Sunhee and Seoyong (2020) Perceived barriers includes the costs, perceived risk or inconvenience, E.g side effect of a medical procedure and discomfort, for instance pain and emotional upset related to carrying out a specific behavior. Thus, perceived benefits and perceived barriers have opposite characteristics, any couple that perceive such barriers as mentioned above may not adopt family planning successfully. These barriers may interfere with the motivation to perform the health behavior.

**Cues to Action:-** Many factors can trigger couples' actions towards accepting family planning which may be internal E.g health conditions or external for instance couples' discussion about family planning, other influences upon the performance of health behavior such as demographic factors or psychological characteristics, E.g peer pressure are assumed to exert their effects via changes in the components of the Health Belief Model. Events experienced by a couple during the period of decision-making about family planning either internal or external, which may encourage or discourage them to perform the health behaviour are cues to action.

**Self-Efficacy: -** This refers to the level of a person's confidence in his/her ability to successfully perform a behaviour. Self-efficacy is directly related to whether a person performs the desired health behaviour. Thus any couple that believe that they can adopt family planning will practically adopt family planning.

This theory is thus relevant to this paper based on the fact that couples should have proper understanding of the health problems caused by uncontrolled birth, E.g. unwanted pregnancy, infant and maternal mortality and contraction of STDs and HIV/AIDS, this understanding makes it possible for couples to adopt or reject family planning. Also despite the fact that a certain action may be beneficial for avoiding a health problem, E.g. family planning utilization, the couple may perceive difficulties in performing such behaviour as a result of some barriers like being expensive, time consuming, religious belief etc. Thus, if couples believe that non-utilization of family planning will result to health problems there is high tendency that they would want to adopt family planning. Couples who have confidence that a health behaviour like family planning utilization will be efficient, will adopt family planning than those who doubt its efficacy. The Health Belief Model has been criticized because it does not take into account behaviours that are performed for non-health related reasons, such as social acceptability. It assumes that everyone has access to equal amount of information on any illness or disease. Also it does not account for a person's attitudes, beliefs or other individual determinants that dictate a person's acceptance of a health behaviour. Finally Health Belief Model does not take into account behaviours that are habitual and thus may inform the decision-making process to accept a recommended action (Boston University School of Public Health, 2013).

## METHODS

The cross-sectional survey design was adopted for this research work. The population of study was 2,049,924 and the sample size of 400 was derived using Taro Yamane's formular. The probability sampling techniques was adopted for the quantitative data collection while purposive sampling technique was adopted in selecting the participants for the In-Depth Interviews (IDIs). Data for this paper was derived from the administration of 400 structured questions using a questionnaire schedule and 8 In-Depth Interviews involving 4 married men and 4 married women.

The quantitative data collected for this study was processed using the statistical package for social sciences (SPSS Version 20). The quantitative data was analyzed using descriptive statistics such as simple frequency distribution tables, simple percentages and graphic illustrations. The study interviewed couples who were 18 years and above who reside at the study area at the time of the study. The qualitative data from (IDIs) were carefully transcribed, sorted, edited and analyzed thematically. The purposive sampling technique was adopted in selecting participants for the in-depth interview. While probability sampling technique was adopted for the quantitative data which involves simple random sampling technique and multistage sampling technique.

## FINDINGS/RESULTS

The Socio-Demographic data of the respondents were analyzed and presented in Table 1.

**Table 1: Socio-Demographic Characteristics of the Respondents**

	Variables	n=334	%=100	x
.	<b>Sex</b>			
	Male	152	45.5	
	Female	182	54.5	
	<b>Age</b>			
	18-27	21	6.3	
	28-37	94	28.1	
	38-47	79	23.7	45
	48 and Above	140	41.9	
	<b>Educational Qualification</b>			
	No Formal Edu	3	.9	
	FSLC	96	28.7	
	SSCE/WAEC	149	44.6	
	NCE	31	9.3	
	HND/BSC.	48	14.4	
	M.SC/PhD	7	2.1	
	<b>Marital Status</b>			



	Married		314		94.0		
	Divorced		4		1.2		
	Widowed		16		4.8		
	<b>Occupation</b>						
	Civil servant		73		21.9		
	Farming		19		5.7		
	Business/trading		201		60.2		
	Artisan		16		4.8		
	Clergy		3		.9		
	Self employed		19		5.7		
	Retired		3		.9		
	<b>Religious Affiliation</b>						
	African Traditional Religion		4		1.2		
	Islam		1		.3		
	Christianity		329		98.5		
	<b>Place of Residence</b>						
	Rural		141		42.2		
	Urban		193		57.8		
	<b>Family Size</b>						
	1-3 (Small)		94		28.1		
	4-6 (Medium)		133		39.8		5
	7 and Above (Large)		107		32.0		

The above Table presents results of the socio-demographic characteristics of the respondents. It revealed that 182(54.5%) of the respondents were females, suggesting that a majority of the respondents were females. The average age mean of the respondents is 45, implying that they are adults and matured. A majority of the respondents 149(44.6%) had SSCE/WAEC and followed by 96(28.7%) with FSLC which translate to primary education. A large number 314(94.0%) of the respondents are married and with their spouses, while 16(4.8%) and 4(1.2%) are widowed and divorced respectively. However, about 201(60.2%) of them are into business/trading, this shows they are economically engaged and they can afford the cost of family planning methods. A small fraction 3(0.9%) was clergies, indicating a possibility of faith conflict with family planning methods in the area. Almost 329(100%) of the respondents are Christians, and this is not surprising as the study was carried out in Anambra which is a Christian dominated state.

## Utilization of family planning among couples

From the quantitative findings, the respondents were asked whether they are using family planning methods or not. The responses are presented in Table 2

**Table 2: Distribution of Respondents by whether they are using any family planning method or not**

	<i>F</i>	%
YES	73	21.9
NO	261	78.1
Total	334	100.0

Table 2 shows that 73(21.9%) of the respondents are using family planning methods, while 261(78.1%) are not. This suggests low level of utilization of family planning amongst the respondents. In addition, effort was made to ascertain the forms of family planning methods that are being used by the respondents. The responses are shown in Table 3.

**Table 3: Distribution of Respondents' views on type of Family Planning Utilization Methods**

<i>Responses</i>	<i>F</i>	%
Medical Methods	24	7.2
Non-Medical Methods	49	14.7
<b>Total</b>	<b>73</b>	<b>21.9</b>

Table 3 shows that out of the 73(21.9%) that are using family planning, 24(7.2%) indicated that they are using Medical Methods of family planning, while 49(14.7%) were using Non-Medical methods.

### The IDI interviewees opinions are as follows: A female participant noted:

As for me and my husband, we do not use any family planning method. This is because we do not have sex again. Yes, I know some persons that use them, but most of them avoid the injection type and would prefer the insertion method which they can remove anytime they like (Married woman, 45 years old from Nawfia).

On the other hand, the responses of their male counterparts are presented hereunder. First, a male respondent noted:

Yes, I use family planning. The type I use is condom and it is alright for me. Although most fellow men would say it doesn't give them the full sexual pleasure they need (Married man, 53 years old from Nkpor).

Conversely, a male IDI respondent said:

Sincerely, I do not use family planning. It is let for a person to say he is okay with certain number of children or not. So, I am not yet done with the number of children needed and see no need of using family planning (Married man, 34 years old from Nawfia).

These findings implies that there is low level of family planning utilization among the participants in the study area.

### How Spousal communication affects family planning utilization.

The second focus of this paper is to ascertain how spousal communication affect the use of family planning among couples in Anambra State. First, the respondents were asked whether discussion of family planning increase partner's knowledge. Their responses are shown in table 4;

**Table 4: Distribution of Respondents' views on whether Spousal Communication increases the Awareness about Family Planning.**

Responses	F	%
True	329	98.5
False	4	1.2
No idea	1	.3
<b>Total</b>	<b>334</b>	<b>100</b>

Table 4 displays the respondents' views on whether discussion of family planning increases couple awareness about family planning. The majority of respondents 329(98.5%) said it is true that discussion of family planning increases couple awareness of family planning while 4(1.2%) said it is false. Again, 1(0.3%) respondent indicated to have no idea on whether discussion increases partners' awareness.

Furthermore, effort was made to ascertain if family planning utilization is higher among couples that discuss family planning. The responses are shown in table 5.

**Table 5: Distribution of Respondents' views on whether Family Planning Utilization is higher among Couples that Discuss Family Planning**

<i>Responses</i>	<i>F</i>	<i>%</i>
True	323	96.7
False	4	1.2
No idea	7	2.1
<b>Total</b>	<b>334</b>	<b>100</b>

Table 5 displays the analysis on whether family planning utilization is higher among couples that discuss it. The result shows that majority 323(96.7%) of the respondents says it is true that family planning utilization is higher among couples that discuss family planning. Again, as 7(2.1%) were indecisive, 4(1.2%) says it is false.

A female IDI participant reported that:

Yes, couples who discuss family planning issues have more chances of adopting family planning. If a woman who knows what she undergoes during pregnancy and child birth engages in discussion with the spouse this can enable the spouse to give his consent. And the woman will go ahead and adopt family planning method. Adopting it without the consent of the man could be disastrous in the home (Married woman, 40 years old from Enugwu-ukwu).

In the same vein, another participant stated that:



As couples discuss on family planning issues it is then that both of them will choose the type of family planning method they will adopt. For me a woman has no right to decide on this alone. Without agreement between the man and his wife, utilization of family planning might not work (Married man, 28 years old from Ogidi).

The above findings revealed that discussing family planning issues with one's spouse can increase the possibility of utilizing family planning. While on the contrary low communication among couples might hinder family planning utilization.

**Table 6: Distribution of Respondents' views on whether Male Involvement can Help Increase Spousal communication on Family Planning issues.**

<i>Responses</i>	<i>F</i>	<i>%</i>
True	329	98.5
False	5	1.5
Total	334	100

Table 6 shows that majority of the respondents 329(98.5%) said it is true that male involvement would help increase Spousal communication on family planning issues, while 5(1.5%) were of the view that it is false.

The qualitative results of the in-depth interviews are presented to complement the quantitative analysis.

A female participant said:

Personally, I have observed that family planning issues are regarded as women issues but it should not be so. when men are invited for seminars on family planning, it will create a level of awareness to them. As we all know that men are the heads of families they will prefer to initiate discussion on family planning rather than their wives. So to my best of knowledge male involvement can increase spousal communication on family planning issues and may lead to adoption of family planning methods. (Married woman, 32 years old from Nawfia).

Nonetheless, a male participant said:

For me it is not out of place for government, NGO's and leaders in the society to conduct continuous awareness programs on family planning issues for men too, how can one discuss what he has little or no knowledge about? you won't even have the boldness. But when men know what to discuss they will be willing to engage on such discussion.

(Married man, 48 years old from Nkpor).

The above findings revealed that male involvement in family planning and fertility issues can help improve their knowledge and also enhance family planning utilization. Thus male involvement increases chances for spousal communication about family planning.

Additionally, Hypothesis was tested to reveal how Spousal communication affects family planning utilization;

**Hypothesis:** "Respondents who discuss family planning with their spouses are more likely to adopt family planning than respondents who do not discuss family planning with their spouses in Anambra State". Questionnaire items '11' and '13' formed the basis for testing this hypothesis by cross tabulation. To do this, initial responses of item 11 which were yes, no and can't say were recoded into 'yes' and 'no', thereafter used in cross tabulating item 13.

The result is as shown in Table 7

**Table 7: Test and Result of Hypothesis**

DISCUSSION of Family Planning	Are you using any family planning method?			Total	Chi-Square Test  $\chi^2 = 21.844_a$  (N = 334)  df = 1  P=.000, <0.05 Sig.
		Yes	No		
Yes	Count/% within	261(100.0%)	67(91.8%)	328(98.2%)	
No	Count/% within	0(0.0%)	6(8.2%)	6(1.8%)	
Total	Count/% within	261(100.0%)	73(100.0%)	334(100.0%)	

Table 7 shows result of the hypothesis and it revealed that system computed chi-square is 21.844, with degree of freedom (df=1) and p-value of 001 significance level. Since the p-value is less than the 0.05 level of significance, the substantive hypothesis is therefore upheld. This means that respondents who discuss family planning with their spouses are more likely to adopt family planning than respondents who do not discuss family planning.

## DISCUSSION OF FINDINGS

This paper sought to find out the nexus between spousal communication and family planning utilization in Anambra state. Spousal communication was perceived by the respondents as an effective strategy through which family planning utilization can be enhanced, to them it has the potential to influence the adoption of family planning amongst couples to a greatly. Also, majority of the respondents believed that family planning utilization is higher among couples that discuss family planning issues. This is in support of the study carried out in Osun state by Bolarinwa et al.(2022) which revealed that women whose husbands has good and fair communication are more likely to use family planning methods among young mothers that live in pre-urban areas of Osun state,Nigeria. The findings revealed that male involvement can help increase spousal communication on family planning issues. This is similar to the study carried out by Peter-Kio (2021) in River state Nigeria which revealed that because men are heads of family they make decisions that impact the lives of their family members which also include uptake of family planning by their wives.This is also in line with the findings of Ademola et al., (2014) which indicated that male involvement can lead to contraceptive uptake through the path of increased spousal communication. Similarly, Sharja ad et al., (2014) submitted that spousal communication on family planning is an effective way to motivate men for supporting and using contraceptives.Also confirmed by the work of Osuafor et al.(2023) which stated that the involvement of men in decision and communication on reproductive health is vital and the low involvement of men in discussions on fertility issues is detrimental. A study by Alo et al. (2020) showed that women who perceived support from spouse or others on the issue of family planning are more likely to use family planning method in Nigeria. This study showed that involving men in family planning programs will enhance men's involvement and improve uptake of family planning, this is in line with the study of Berhane et al.(2011) which stated that family planning programs should be targeted at encouraging men to improve on discussion and agreement about family planning utilization. Thus Spousal communication on family Planning enables couples to view and understand each other's opinion on issues concerning family planning and this makes it more likely for family planning uptake.

## CONCLUSION

It can be concluded that family planning awareness is increasing among couples in Anambra State. Because there exists abundant information on the various family planning methods but there is a low level of utilization. One of the reasons for this low utilization is as a result of low level of spousal communication on family planning and other reproductive health issues. Thus, increase in spousal communication is a good strategy to improve family planning utilization in Anambra State. Couples that discuss family planning with their spouses adopt family planning methods more than their counterparts. Effective spousal communication and male involvement can enhance family planning utilization.

However, poor spousal communication was found to have affected the use of family planning amongst couples in Anambra state negatively. This paper recommends that couples should use some communication strategies like, good voice tone, persuasion and listening while the other spouse is speaking to improve on spousal communication which will enable family planning uptake. Hence, spousal communication enables couples reveal their level of knowledge and understanding on family planning and enhances joint decision-making on fertility matters. Couples who have healthy communication on family planning with their spouses are believed to be more likely to adopt it than those who do not.

## RECOMMENDATIONS:

Based on the findings in this paper, the following recommendations are presented:

1. Couples should adopt some communication strategies like, good voice tone, persuasion and listening while the other spouse is speaking to improve on spousal communication which will enable family planning uptake.
2. There should be increased involvement of men in family planning programs, this will enable men to get direct knowledge about family planning methods, which will improve family planning utilization among couples.
3. There should be joint decision making about family planning methods and other fertility issues, this will help to reduce suspicion and build trust among couples and also increase the possibility of family planning uptake and continuation.

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