Knowledge and Attitude of Men at Reproductive Age Towards Permanent Family Planning Method

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ABSTRACT

Family planning refers to a conscious effort by couples to limit or space their children through contraceptive methods. It addresses maternal reproductive health by promoting adequate birth spacing, preventing unwanted pregnancies and abortions, reducing sexually transmitted infections, and enhancing the quality of life for mothers, fetuses, and families overall.

This study assessed knowledge of and attitudes toward permanent family planning methods among men of reproductive age. Specific objectives included evaluating knowledge levels, attitude levels, and associations between demographic factors and these variables. The conceptual framework drew on the Health Belief Model, with data collected via a sociodemographic proforma, a semi-structured knowledge questionnaire, and a Likert attitude scale.

A pilot study preceded the main research, conducted among 100 men of reproductive age in a selected area of Kozhikode. Data collection began after obtaining informed consent, followed by tabulation and analysis. Findings revealed that 32% demonstrated excellent awareness, 31% good awareness, 22% moderate awareness, and 15% low awareness; for attitudes, 52% were positive, 41% neutral, and 7% negative. Significant associations emerged between monthly income and knowledge levels, as well as between occupation and attitude levels.

Key words: Knowledge, attitude, permanent family planning method, men at reproductive age.

INTRODUCTION

Family planning represents a voluntary approach to thinking and living, grounded in knowledge, attitudes, and responsible decisions made by couples and individuals. It involves a conscious effort to limit or space the number of children through contraceptive methods while promoting maternal reproductive health, adequate birth spacing, prevention of unwanted pregnancies and abortions, reduced risk of sexually transmitted infections, and improved quality of life for mothers, fetuses, and families overall.

Vasectomy provides a permanent, safe, and worry-free option for birth control. This simple, relatively straightforward surgical procedure renders men sterile by preventing biological fatherhood. It entails cutting or blocking both the left and right vas deferens, ensuring that a man's ejaculate no longer contains sperm and cannot cause pregnancy.

In Africa, short-term and reversible contraceptives far outnumber long-acting and permanent methods (LAPM), such as vasectomy. Studies attribute low acceptance in Nigeria to limited knowledge, with only 13.2% of respondents demonstrating high awareness. Most exhibited negative attitudes toward vasectomy, believing it

unsuitable for men and that women should bear responsibility for family planning—though men, as household heads, should dictate the method.

Problem Statement

A descriptive study to assess the knowledge and attitude of men at reproductive age towards permanent family planning method at selected area in Kozhikode.

Objectives

1. To assess the level of knowledge of men at reproductive age towards permanent family planning method.

2. To assess the attitude of men at reproductive age towards permanent family planning methods.

3. To find association between level of knowledge of men at reproductive age towards permanent family planning methods and selected demographic variables.

4. To find association between level of attitude of men at reproductive age towards permanent family planning methods and selected demographic variables.

Hypothesis

1. There is a significant association between level of knowledge of men at reproductive age towards permanent family planning method and selected demographic variables.

2. There is a significant association between level of attitude of men at reproductive age towards permanent family planning method and selected demographic variables.

METHODOLOGY

Study Approach

Quantitative research approach was used.

Study Design

Descriptive design was used.

Study Population

All men at reproductive age between 21-48 years.

Sample

100 men at reproductive age.

Sampling Technique

Purposive sampling technique was applied to select 100 men for the study.

Sampling Criteria

Inclusion criteria

• Men who are willing to participate in the study.

• Men at age between 21-48 years

Setting of the Study

Manassery area, Mukkam, Kozhikode.

Study Variable

Research variable: knowledge and attitude towards permanent family planning methods.

Demographic variables: Age, area, religion, occupation, education, marital status, type of family,

number of family member and monthly income.

Tool

Section A- Demographic data

It consists of 9 questions to collect Age, area, religion, occupation, education, marital status, type of family, number of family member, monthly income.

Section B – Semi structured questionnaire

It consists of 15 questions to assess the knowledge of men regarding permanent family planning method.

Section C – Likert scale

It consists of 12 items to assess the attitude of men regarding permanent family planning method.

Data Collection Procedure

A semi-structured questionnaire was used to collect the data. The questionnaire consists of 3 sections with a total of 36 quantitative items. Section 1 was designed to collect data on socio-demographic characteristics, section 2 was designed to collect information about knowledge of permanent family planning methods, and values of 1 and 0 given for each correct and incorrect answer respectively, and section 3 was designed to collect information about attitude towards permanent family planning methods using a likert categorization method (strongly agree, agree, neutral, disagree, strongly disagree). Questionnaires were first prepared in the English language then translated into Malayalam. Informed consent was obtained from participants to collect the data. The tool was distributed to the participants via QR code. The response was collected in google sheets.

Reliability of the Tool

The reliability of the tool was established through expert validation and a pilot study. Experts in nursing research and psychosocial health reviewed the tool for content validity, ensuring alignment with the study's objectives on substance use rejection and self-regulation.

The pilot study involved 10 men of reproductive age selected based on inclusion criteria (e.g., college students from Kozhikode District meeting demographic and eligibility standards). This pre-test confirmed the tool's internal consistency (Cronbach's alpha >0.70), clarity, and applicability without influencing the main study sample.

Data Processing and Analysis

Data was processed manually to assess the knowledge and attitude of men at reproductive age. Pearson's chi square test was used to identify the association between each variable with demographic variables. The data presentation was done using frequency, percentage and mean, and tables, graphs, and texts were used for data presentation.

Ethical Consideration

The research proposal was presented in front of research committee of KMCT COLLEGE OF NURSING and approval was obtained. Ethical clearance for the study was obtained. Then was bought permission from KMCT ethics committee. Informed consent was obtained from the subjects

Results

Among 100 men of reproductive age, 58% were 21–27 years, 27% were 28–34 years, 10% were 35–41 years, and 5% were 42–48 years.

Most resided in rural areas (77%), followed by urban settings (22%) and slums (1%). Religiously, 51% identified as Muslim, 32% as Hindu, and 17% as Christian.

Occupationally, 57% were self-employed, 21% held private jobs, 16% were unemployed, and 6% worked in government positions. Education levels showed 45% as graduates, 33% undergraduates, 14% with secondary education, and 8% with primary education only.

Marital status indicated 58% married and 42% unmarried. Family structures were predominantly nuclear (78%), with 22% in joint families.

Regarding children, 42% had none, 32% had two, 15% had three or more, and 11% had one. Monthly income varied: 30% earned ₹10,001–20,000, 25% up to ₹10,000, 24% above ₹30,000, and 21% ₹20,001–30,000.

Table I. Frequency (percentage) distribution of socio demographic characteristics of the sample.

Si No.	Demographic Variables	Frequency	Percentage
1	Age		
	21-27 Years	58	58%
	28-34 Years	27	27%
	35-41 Years	10	10%
	42-48 Years	5	5%
2	Area Of Residence		
	Rural	77	77%
	Urban	22	22%
	Others	1	1%
3	Religion		
	Hindu	32	32%
	Christian	17	17%
	Muslim	51	51%
4	Occupation		

	Self Employed	57 6	57% 6%
	Govt Empolyed	21	21%
	Private Job	16	16%
	Unempolyed		
5	Education		
	Primary Education	8	8%
	Secondary Education	14	14%
	Undergraduate	33	33%
	Graduate	45	45%
6	Marital Status		
	Married	58	58%
	Unmarried	42	42%
7	Type Of Family		
	Nuclear	78	78%
	Joint	22	22%
8	Number Of Children		
	0	42	42%
	1	11	11%
	2	32	32%
	3 and above	15	15%
9	Monthly Income		
	Upto 10000	25	25%
	10001-20000	30	30%
	20001-30000	21	21%
	Above 30000	24	24%

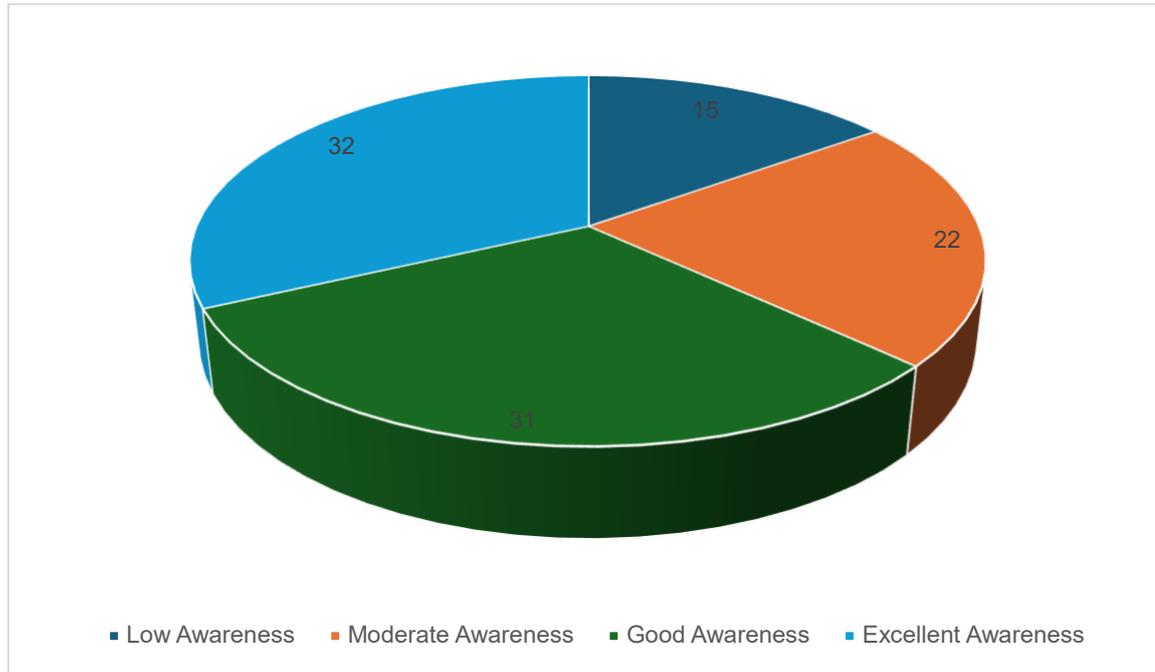Fig.1 Distribution of sample based on level of knowledge

Figure 1 illustrates the distribution of awareness levels regarding permanent family planning methods among 100 men of reproductive age. Fifteen participants (15%) demonstrated low awareness, 22 (22%) had moderate awareness, 31 (31%) showed good awareness, and 32 (32%) exhibited excellent awareness. The mean awareness score was 10.10 (SD = 3.70).

This distribution indicates a generally high level of awareness, with 63 participants (63%) achieving good or excellent scores. The relatively low standard deviation suggests moderate consistency in scores across the sample. Most participants cluster toward higher awareness levels, which aligns with the significant association found between knowledge and monthly income in Table 2.

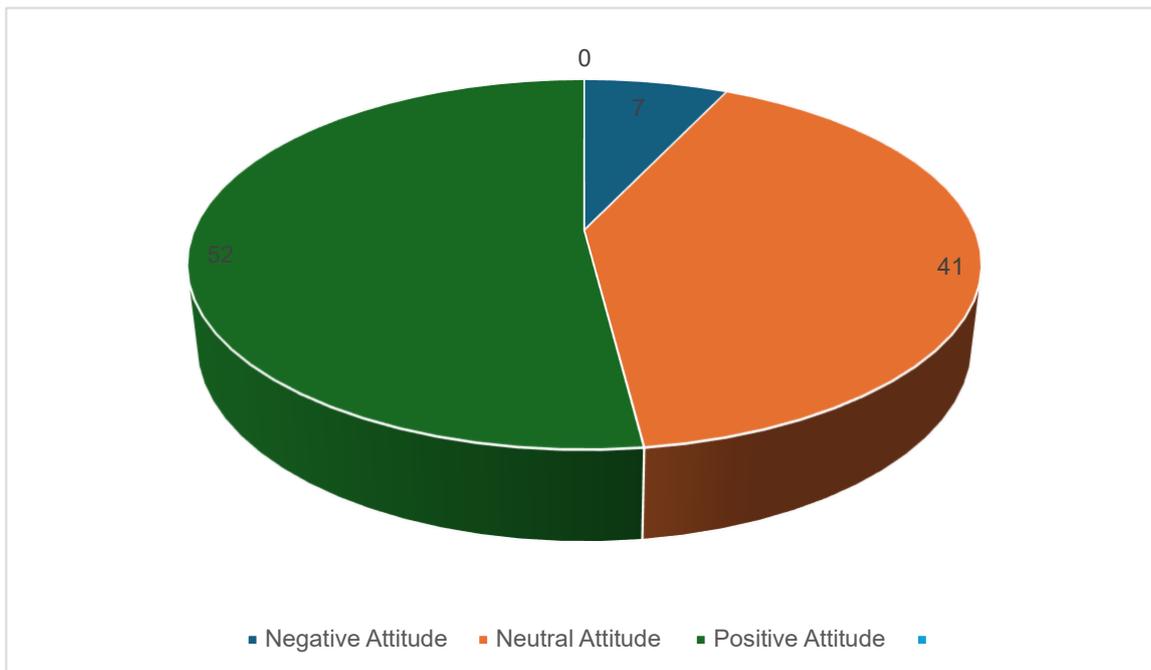Fig 2 Distribution of sample based on level of attitude.

Fig.2 shows that 7 had negative, 41 had neutral and 52 had positive attitude respectively. Mean attitude score is 43.67 and standard deviation is 10.4.

Association Between Knowledge Levels and Demographic Variables

Pearson's chi-square test was used to analyze the association between the level of knowledge regarding permanent family planning methods among men of reproductive age and selected demographic variables.

Table 2: Association between knowledge level and selected demographic variables

Selected Variables	χ^2 Value	df	p-value	Significance (p < 0.05)
Age	8.0302	9	0.5311	No
Area of residence	8.4048	6	0.2099	No
Religion	3.1329	6	0.7920	No
Occupation	12.7707	9	0.1732	No
Education	10.0994	9	0.3425	No
Marital status	2.1752	3	0.5368	No
Type of family	0.4002	3	0.9402	No
Number of children	8.6952	9	0.4659	No
Monthly income	17.2066	9	*0.0456	Yes

Table 3: Association between attitude level and selected demographic variables

Selected Variables	χ^2 Value	df	p-value	Significance (p < 0.05)
Age	3.1319	6	0.7921	No
Area of residence	6.9075	4	0.1408	No
Religion	1.6933	4	0.7919	No
Occupation	20.2892	6	*0.0024	Yes
Education	4.0541	6	0.6694	No
Marital status	4.1391	2	0.1262	No
Type of family	2.1722	2	0.3375	No
Number of children	6.5744	6	0.3620	No
Monthly income	6.1559	6	0.4060	No

DISCUSSION

Momina Ali et.al (2023) aimed to assess the knowledge, attitude and associated factors towards vasectomy among married men in Arba Minch Town, Southern Ethiopia. Research methodology used in the study was a cross sectional study design and the sampling technique used was simple random sampling. The sample size was 624 married men. The data was analyzed using descriptive and inferential statistics. Major findings of the study were 60.6% of men had good knowledge and 48.4% had a positive attitude towards vasectomy.

Nursing Implications

Nursing Education

The sample group should be counselled and educated regarding side-effect of contraceptive intake.

Parents/relatives should be provided information regarding use of family planning methods.

Nursing Administration

The role of nursing administration is very important. They can organize health education program regarding use of family planning methods.

Nursing administration at hospital and community level should evaluate the effectiveness of structured teaching program regarding advantages of family planning methods.

Nursing Practice

Nurse should be skilled in identifying, explaining and verifying the problems faced by the clients.

In community, student nurse must have knowledge and skills to provide knowledge regarding the advantages of family planning methods.

Nursing Research

Research finding and result of study should publish disseminated through proper channel to enhance the knowledge of consumer regarding alvantages of family planning methods. • The study finding can be kept as the base line data and further research can be conducted at different setting.

RECOMMENDATIONS

Similar study can be replicated as a large sample and in other setting.

Similar study can be conducted by using quasi experimental design.

The follow up study can be done to assess the effectiveness of structured teaching program regarding permanent family method.

CONCLUSION

The present study assessed the knowledge and attitude of men at reproductive age towards permanent family planning methods at selected area in Kozhikode. Utilizing a descriptive research design and a purposive sampling technique. The sample size was 100. Data were collected using a self-administered demographic proforma, a semi-structured knowledge questionnaire and likert attitude rating scale. The findings revealed that 32% exhibit excellent knowledge, 31% had a good awareness, 22% had moderate awareness and 15% had low awareness. In terms of attitude, 52% had positive attitude, 41% had neutral attitude and 7% had negative attitude.

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