KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY COLLEGE OF HEALTH SCIENCES SCHOOL OF MEDICAL SCIENCES DEPARTMENT OF COMMUNITY HEALTH



DETERMINANTS OF FAMILY PLANNIG CHOICES IN THE TAMALE METROPOLIS OF NORTHERN REGION, GHANA

DR. DAVID ZAWUMYA KOLBILLA NOVEMBER 2008

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DETERMINANTS OF FAMILY PLANNIG CHOICES IN THE TAMALE METROPOLIS OF NORTHERN REGION, GHANA

A THESIS SUBMITTED TO THE SCHOOL OF GRADUATE STUDIES, KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY, KUMASI IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE AWARD OF MPH DEGREE IN POPULATION AND REPRODUCTIVE HEALTH.

DR. DAVID ZAWUMYA KOLBILLA NOVEMBER 2008

DECLARATION

I HEREBYD ECLARETHAT, EXCEPTFORS PECIFICREFERENCESW HICHH AVEB EEND ULYACKNOWIEDGED, THIS WORK IS THE RESULTOF MY OWN REID RESEARCH AND ITHAS NOTBEEN SUBMITTED ETHERIN PART ORW HOLEFOR ANY OTHER DEGREE EISEWHERE.

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DEDICATION

This book is dedicated to the almighty God for the health, strength and wisdom given me and my supervisors to bring this work to a successful end and to my family for the total support given me through out the program.

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DEFINITION OF TERMS

Teenagers:

YOUNG PEOPLE AGED 13 TO 19 YEARS

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Confidentiality: A GREEM ENTB ETWEENCLIENTANDP FOVIDERTHATALLCONVERSATIONS BE KEPT PRIVATE UNLESS THE CLIENT GIVES EXPLICIT PERMISSION FOR SUCH

- Convenience: AS UITABLES TATE
- Privacy: PERSONALI SSUES

Interventions: STEPSTAKEN AND AIMED ATALTERINGC ON TRACEPTIVEB EHAVIOURFOR

INFORM ATION TOBED ELIVERED TOO THEFS

BETERU TILIZATION

- Urban Area: A POPULATION OF ABOUT 1500 PEOPLE WITHIN A GEOGRAPHICAL AREA
- Peri-Urban Area: A POPULATION OF ABOUT 1000 PEOPLE WITHIN AGEOGRAPHICAL AREA
- Rural Area: A POPULATION OF ABOUT 500 PEOPLE OR LESS WITHIN A GEOGRAPHICAL.
- Family Planning: BIRHC ONFOLANDC ONFRACEPTIVE AREU SEDHEREI NERCHANGE ABLYTO MEAN SEEPS TAKEN TO PREVENT THE OCCURRENCE OF UNWAVED, UNINTENDED ORM ISTIMEDP REGNANCY.

ABBREVIATIONS/ACRONYMS

BTL	-	BILATERAT UBAIL IGATION
CBS	-	COMMUNITY'B ASEDS ERVICES
CHNTS	-	COMMUNITY HEALTH NURSING TRAININGS CHOOL
CHPS	-	COMMUNITY'H EALTH PLANNING AND SERVICES
C.H OSPITAL	-	CENTRALH OSPITAL
CI	-	C ONFIDENCE INTER/AL
СҮР	-	COUPLEY EARPROTECTION
COC	-	COMBINED RAIC ONTRACEPTIVE
D EPO	-	D EPOPROVERA
EC	-	EMERGENCYC ON IRACEPTION
FP	-	FAMILYPLANNING
FCUBE	-	FREECOM PULSORY UNIVERSALBASIC EDUCATION
GDHS	-	G HANAD EM OGRAPHIC ANDH EACHS URVEY
GSS	-	GHANASTAIISIICAIS ERVICES
GSM F	-	GHANASOCIAIM ARKEING FOUNDATION
IUD	-	INTRAUTERINEC ONTRACEPTIVED EVICE
JSS	-	JUNIORS ECONDARY SCHOOL
LAM	-	LACTATIONALA MENORHOCA
MHD	-	M EIROPOLITANH EALTHD IRECTORATE
МОН	-	MINISIRYO HI EACH
MCH	-	MATERNALANDC HILDH EACTH
NGOS	-	N ON-G OVERNM ENTALO REANIZATIONS
N ORICY	-	N ORIGYNON

OR	-	Odds Ratio
OCP	-	Oral Contraceptive Pill
PPA G	-	Planned Parenthood Association of Ghana
RTI	-	Reproductive Track Infection
RH	-	Reproductive Health
STI	-	Sexually Transmitted Infection
STD	-	Sexually Transmitted Disease
SSS	-	Senior Secondary School
SPSS	-	Statistical Package for the Social Sciences
ТР	-	Target Population
T. Central	-	Tamale Central
wно	-	World Health Organization
WIFA	-	Women in Fertility Age-group

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BACKGROUND

THE TAMALE MEROPOLIS RECORDS ONE OF THE HIGHEST FERTILITY' RATES IN GHANA ESTIMATED AT 7.0. IT HAS AN ESTIMATED POPULATION OF 366,535. WOMEN IN REPRODUCTIVE AGE CONSTITUTE ABOUT 24% OF THE POPULATION. CONTRACEPTIVE ACCEPTANCE RATE IS REPORTED AS 21% BY THE METROPOLITAN HEACH DIRECTORATE (MHD). THE KNOWLEDGE OF DETERMINANTS OF FAMILY PLANNING CHOICES WILL HELP POLICY MAKERS AND SERVICE PROVIDERS TO COME OUT WITH INTERVENTIONS THAT WILL IMPROVE UTILIZATION OF EFFECTIVE FAMILY PLANNING METHODS IN THE METROPOLIS

OBJECTIVE

TOD EFERMINE FAMILY PLANNING CHOICES AND THEIRD EFERMINANTS IN THE TAM ALE M ETROPOLIS.

METHODS

THE SIUDY IS A CROSS-SECTIONAL ANALYTICAL SIUDY, CONDUCTED FROM JULY - SEPTEMBER 2008 IN THE TAMALE METROPOLIS PRIMARY DATA WAS OBTAINED FROM RESPONDENTS USING INTERVIEWER ADMINISTERED QUESTIONNALRES. IN-DEPTH INTERVIEW'S OF SERVICE PROVIDERS WERE CARRED OUT USING INTERVIEW GUIDES AND OBSERVATION AT FAMILY PLANNING SERVICE DELIVERY POINTS SECONDARY'D ARAW ASO BTAINEDB YR EVIEWING FAMILY PLANNING DATAFOR THE METROPOLIS FROM THE M H D. STUDY POPULATION- WOMEN AND MEN IN THE REPRODUCTIVE AGE GROUP (15 TO 49 YEARS) IN ASTABLE RELATIONSHIP AND COUPLES OF REPRODUCTIVE AGEI NTHEM ETROPOLIS.

MULTI STAGE SAM PLING WAS USED. RANDOM SAM PLING OF COM MUNITIES FOLLOWED BY RANDOM SAM PLING OF HOUSEHOLDS, AND THEN RANDOM SAM PLING OF INDIVIDUAL RESPONDENTS. PURPOSIVE

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sampling of service providers was done. Random sampling of private pharmacists and dispensary technicians was also done.

Data was entered in access software and exported to Stata for analysis.

RESULTS

A TOTAL OF 405 PEOPLE (161 MALES AND 244 FEM ALES) WERE INTERVIEWED. MEAN AGE OF RESPONDENTS WAS 27.9. MEAN PARTY WAS 2. ABOUT 40.5% OF RESPONDENTS HAD ATLEAST PRIMARY EDUCATION. THE CONTRACEPTIVE ACCEPTANCE RATE WAS 39%. THE MOST PREFERRED METHODS WERE MALE CONDOM S 56.6%, PILLS 1 5.7% AND INJECTROLES 10.7%.

THE FACTORS THAT WERE SIGNIFICANTLY ASSOCIATED WITH NON UTILIZATION OF CONTRACEPTIVE METHODS INCLUDE; ISLAMIC RELIGION, LACK OF FORM AL EDUCATION, LESS THAN 20 YEARS OF AGE AND MARRED COUPLES. CHRISTIAN RELIGION AND FORM AL EDUCATION ARE POSITIVELY ASSOCIATED WITH USE OF EAMILY PLANNINGS ERVICES.

ONLY THREE CENTERS IN THE METROPOUS PROVIDES THE FULL RANGE OF CONTRACEPTIVE METHODS INCLUDING IUD INSERTION, IMPLANTS AND STERILIZATION (MAINLY BTL). THERE WAS LACK OF PRVACY IN MOSTEAMILY PLANNING SERVICE POINTS THE RURAL AREAS ARE POORLY COVERED.

CONCLUSION

THE FP ACCEPTANCE RATE IN THE METROPOLIS IS HIGHER THAN THE METROPOLITAN AVERAGE BUTIS STILL ON THE IOW SIDE. THE PREDOMINANT CONTRACEPTIVE METHOD OF CHOICE WAS THE CONDOM WHICH HAS A IOWER EFFECTIVENESS THAN MOST OF THE OTHER MODERN CONTRACEPTIVE METHODS. THE PROMINENT DETERMINANTS OF CHOICE OF METHOD WERE EDUCATION, PERCEPTIONS ABOUT SAFETY, EFFECTIVENESS AND IOW SIDE EFFECTS PROFILE. THERE IS THEREFORE THE NEED TO INTENSIFY PUBLIC EDUCATION ON THE EFFICACY AND SAFETY OF CONTRACEPTIVE METHODS SO AS TO ENHANCE UTILIZATION. FP services should be organized adequately to cover the rural areas and to provide ample PRVACY.