Couples' Perceptions of Family Planning Communication Campaigns in Rivers State, Nigeria: A Mixed-Methods Appraisal

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Abstract

This study examined couples' perceptions of family planning communication campaigns in Etche and Omuma Local Government Areas (LGAs) of Rivers State, Nigeria, using a mixed-methods approach. The objectives were to (1) determine the current percentage of couples exposed to the family planning communication campaign, (2) assess the extent to which campaign messages increased knowledge and awareness, and (3) ascertain the degree to which communication efforts influenced couples' attitudes and adoption decisions. Quantitative data were collected through a structured questionnaire administered to 384 randomly selected couples, complemented by 16 in-depth interviews with community health workers and opinion leaders. Data were presented in tables, while analyses were made in simple percentages and weighted mean score (WMS), based on 4-point modified Likert Scale. Findings reveal that only 38% of respondents reported active exposure to family planning campaign messages, while 62% had little or no exposure. Knowledge and awareness levels were relatively low, with 39% indicating that messages improved their understanding of contraceptive options, while 61% reported limited or no significant increase in awareness. Attitudinal shifts showed mixed outcomes-35% of couples expressed positive changes towards adoption, 40% held mixed feelings, and 25% remained resistant. The study concludes that while campaigns are reaching nearly half of the target population, message penetration and attitudinal impact remain insufficient, requiring more culturally sensitive, locally tailored communication strategies.

Keywords: Appraisal, Campaign Communication, Couple, Family Planning, Perception

Introduction

Family planning remains a central pillar in Nigeria's efforts to reduce maternal mortality, improve child health, and promote sustainable development. According to the 2018 Nigeria Demographic and Health Survey (NDHS), the national contraceptive prevalence rate for any method among married women was only about 17%, while the unmet need for family planning stood near 19%. Despite substantial knowledge of contraceptive methods in many parts of the country, actual use lags, particularly in the South-South geopolitical zone.

Within this context, Rivers State is particularly strategic for studying family planning communication campaigns. First, NDHS data show that Rivers State's contraceptive prevalence rate (CPR) for modern methods slightly exceeds the national average-19.6% versus 17%, respectively-indicating both opportunity and gaps for improvement. Also, Rivers State has been active in implementing family planning services: a recent 8-year DHIS2 review in Rivers documented nearly 932,000 individuals counselled between 2014 and 2021, of whom approximately 45.3% accepted at least one family planning method. The state has benefitted from coordination and communication-strengthening efforts such as those by the "Challenge Initiative", which seek to improve demand generation, partner coordination, and government investment in family planning.

However, high levels of counselling or knowledge do not always translate to effective communication about family planning among couples (partners), or to shifts in attitudes and adoption. There remains limited empirical insight into how exposed couples are to campaign messages in LGAs such as Etche and Omuma, and how those messages affect awareness, attitude, and joint decision-making. This study therefore investigates couples' perceptions of family planning communication campaigns in Etche and Omuma LGAs, with particular focus on current exposure, changes in knowledge/awareness, and influence on attitudes and adoption decisions.

Statement of the Problem

Family planning is widely recognised as a cost-effective intervention for reducing maternal and child mortality, yet its uptake in Nigeria remains suboptimal. The 2018 Nigeria Demographic and Health Survey (NDHS) reported a Modern Contraceptive Prevalence Rate (MCPR) of just 12% among currently married women, with substantial regional and socio-cultural variations. In response, the National Family Planning Communication Plan (2017–2020) was designed to increase demand generation through strategic, culturally sensitive messaging that would encourage informed choice and spousal dialogue. However, national-

level reports and donor-funded evaluations often aggregate data, masking the local realities of semi-urban and rural populations.

Despite the implementation of coordinated family planning campaigns, little is empirically known about how couples in semi-urban Local Government Areas (LGAs) such as Etche and Omuma with their distinct socio-cultural dynamics, agrarian economy, and traditional family structures perceive, internalise, and respond to these messages. Most available studies in Nigeria focus either on urban centres or on individual women's knowledge and uptake, neglecting the dyadic nature of family planning decisions, where spousal consent, negotiation, and shared attitudes play a critical role.

This research addresses this gap by exploring exposure levels, knowledge/awareness shifts, and attitudinal changes among couples in Etche and Omuma LGAs, thereby offering evidence to strengthen targeted communication interventions.

Objectives of the study

The objectives of the study were to:

i. determine the current perception of couples on the Family Planning communication campaign,
ii. find out the extent family planning messages has increased knowledge/awareness
iii. ascertain the extent communication campaign has influenced couples attitude towards family planning decisions and adoption.

Literature review

Communication, Mass Media and Family Planning

Communication is the transmission of a message from a source to a receiver. It is one of the essence of human nature. This is an apt description since our lives truly depend on communication. Communication forms the centre of human existence because it is the means by which human beings relate with their environment.

Amodu (2006) believes that the efficacy of communication heavily depends on several factors, including the perceptual process; the participants must have appropriate background; the message must be prominent; it must easily attract attention; it must not be ambiguous; the message must be striking; and there must be an enabling environment for the combination of

all the aforementioned factors. While Omego and Nwachukwu (2015) affirm that communication is effective if what is said is what is meant and what is meant is what is understood.

Eze (2018) argues that communication is an important part of contemporary health management and has argued that strategic awareness on issues relating to health is achieved through communicating relevant aspects of health problems with the target audience. Family planning communication programs through the media provide a great opportunity in helping to promote a healthy nation by providing information to a large audience because of their wide reach and influence in the society and mostly among the reproductive age women. Like mass media campaigns, interpersonal communication approaches are used to influence knowledge, attitude and intentions regarding family planning (Mwaikambo et al., 2011).

Mass media performs three key functions: educating, shaping public opinion and advocating for a particular policy or point of view. As education tools, media not only impart knowledge, but can be part of larger efforts like social marketing, to promote actions having social utility. As public relations tools, media assist organizations in achieving credibility and respect among public health opinion leaders, stakeholders, and other gatekeepers.

Castle and Silva (2009) assert that using the mass media in promoting gender equity and right-based information about family planning may be necessary condition for improving contraceptive uptake and be particularly influential in changing men's attitude about a woman's right to use family planning. Interpersonal communication supported by mass media could play a key role in adoption of bed spacing by increasing correct knowledge on contraception, addressing misconceptions and triggering spousal communication (Khan et al, 2012).

Family planning

Family planning involves the use of contraception to manage and control the number and spacing of pregnancies for utmost care. This helps couples have the number of children needed and when they want; helps improve the health of the mother and children through spacing; helps couples plan better for the family in terms of food, clothing, education, etc; it helps the government to plan for the general welfare of her citizens.

Ikems (2020) believes that reproductive health is an important indices for development, which explains the reason why government and International agencies are interested in issues around it and over the years, have engaged in several means of communication to educate and enlighten the citizens. While supporting this view, Dixit et al (2024) states that a comprehensive family planning increases knowledge, debunk myths and help contraception users achieve healthier development needed to improve family health.

Contraception can be classified according their application, accessibility, efficacy, effectiveness and duration of effect. They are: condom, oral contraceptives, injectable, and implant and intra uterine device. Others are: sterilisation, natural method, locational amenorrhea method, emergency contraceptive, dual protection, etc. According to Odorume (2015) the significant importance of reproductive health in the development of any nation cannot be overemphasized.

Halwani etal (2021) states that pregnancy and family planning is a major concern in the public health of every country, especially in those that lack resources, with large population to manage. This calls for a dear need for proper communication and sensitization of the citizens to address this need.

India and China rank top among countries that adopted extreme interventions to ensure public safety and properly manage the human population. This is a as result of their continues efforts, investments and mobilization for family planning programmes Dixit et al, 2024). Nigeria, the most populous country in Africa and the seventh most populous country in the world; with an annual population growth rate of 3.2 percent and a total fertility rate of 5.5; is projected to be the third most populous country behind India and China by 2050. Currently, 16% WRA have met needs and about 84% are non-users of Family Planning methods (FP, 2018)

Theoretical framework

Perception theory: This theory was propounded by Berelson and Steiner in 1964, with the notion that audience members pay attention to messages, learn the content of the messages and make appropriate changes in attitudes or beliefs to produce a desire behavioural response. Audience perception to media programmes are predetermined by individual experiences, exposure, perception and retention of such messages. The various genres and programmes are part of and have often been from the socio-cultural experience of the audience. This theory is relevant to this topic of study considering the fact that audience members will react to messages or programmes differently because of their

individual differences. In perception theory, different audience will respond differently to the same programme.

Reinforcement theory: Reinforcement theory developed by Joseph Klapper in 1960, maintains that people seek out, absorb and recall information that supports their pre-existing attitude, disposition and beliefs. This theory offers an insightful lens through which to understand media influence on society. Rather than seeing media as a powerful force that changes people's beliefs and attitude, this theory highlights the role of media in reinforcing existing opinions and behaviour. This theory is relevant to this study in the sense that the media, through reinforcement of messages, play a crucial role in raising awareness about pertinent issues like the climate change, family planning etc.

Methodology

The researcher considered survey design as most appropriate for this study based on demographic parameters. The justification for this choice is based on its ability to generate data that border on opinion and attitude. Therefore, the population of this study is made-up of residents of Etche and Omum Local Government Areas of Rivers State. Going by the 2006 National Population Census figure and a projection of 2.5% annual growth rate, Etche LGA has 417,978 while Omuma LGA has165,278; both have a total population of 583,256. Roasoft online software was employed to determine a sample size of 384, with 5% margin of error and 95% confidence level for the quantitative data. This study involved multistage and purposive sampling techniques.

Etche Local Government Area has Nineteen (19) wards while Omuna Local Government Area has ten (10) wards. Eight wards were selected from each local government area, using simple random sampling to ensure that no part of the population is excluded from the sample. From each ward, two communities were selected. From each community selected, two (2) streets / neighbourhoods were selected to give twenty-four (24) streets in all. Out of forty-eight (12) respondents that were sampled in each ward, six (6) respondents were targeted in each community; while three (3) respondents were selected from each street, using alternate compound numbers to select one respondent from each household. However, the targeted respondents are couples who are 18-49 year.

Data from the structured questionnaire and focus group discussion were used. The focus group discussions were conducted at the Model Primary Health Centre Egwi Etche and Eberi Omuma

Model Primary Health Centre. Two sessions of Focus Group Discussion were organized by the researchers, with each session having eight participants.

Data Analysis

Data were presented in tables, allowing for straight forward interpretation of frequency distribution of responses, while analysis were made in simple percentages and weighted Mean Score (WMS) based on a four-point modified Likert scale. A score of 2.5 is the criterion for decision.

Qualitative data obtained from the Focus Group Discussion (FGD) were transcribed and analyzed using the Explanation Building Technique (EBT).

Results

Table 1: Percentage Analyses Showing Frequency of Respondents Exposure to Family Planning Messages

S/No	Option	No	Percentage
1a.	All the time	45	12%
1b.	Most of the time	54	15%
1c.	Some of the time	135	36%
1d.	Rarely	109	29%
	Total	371	100%

Table 1 shows the frequency respondents are exposed to family planning messages. Item (1c) has the highest frequency of 135 representing 36% proving that respondents are exposed to such communication messages some of the time.

Table 2: Respondents Exposure to Channels of Communication/ Messages

S/N	Elements of scale	Response in Mean Score SA	A	D	SD	WMS	Decision
2a.	Radio	524	474	98	33	3.05	Accepted
2b.	Television	216	210	314	90	2.23	Rejected
2c.	Billboard	84	117	300	161	1.78	Rejected

2d.	Newspaper	112	240	284	121	2.04	Rejected
2e.	Flayers/Banners	628	399	98	32	3.11	Accepted
2f.	Social media	156	183	312	115	2.06	Rejected
2g.	Primary Health Workers/Health Facilities	596	474	84	22	3.16	Accepted

On the scale above, four variables on the exposure of respondent to channels of communication are rejected, as against three variables that are accepted. These prove that respondents get family planning communication messages through limited channels.

Table: 3 Respondents perception of Family Planning Messages

S/No	Option	No	Percentage
6a.	Positive	108	29%
6b.	Negative	53	14%
6c.	Mixed feelings	210	56%
	Total	371	100%

Table 3 shows respondents perception of family planning messages. Item (3c) has the highest influence on the scale with 210 respondents representing 56%; which proves that respondents have mixed feeling on family planning messages.

Table 4: Family Planning Campaigns and Perceived Level of Awareness

S/No	Option	No	Percentage
4a.	Very High Extent	67	18%
4b.	High Extent	76	20%
4c.	Low Extent	128	35%
4d.	Very Low Extent	100	27%
	Total	371	100%

Table 4 shows the perceived extent of respondents' awareness on family planning programmes. Item 4c has the greatest influence on the scale with 128 respondents, representing 35% of the response rate. It proves that family planning communication increased awareness, but to a low extent.

Table 5: Family Planning Campaigns and Perceived Level of Knowledge

S/No	Option	No	Percentage
5a.	Very High Extent	72	19%
5b.	High Extent	88	24%
5c.	Low Extent	141	38%
5d.	Very Low Extent	71	19%
	Total	371	100%

Table 5 shows the perceived level of respondents' knowledge on family planning programme, as a result of the activated communication campaigns. Item 5c has the greatest influence on the scale with 141 respondents, representing 38% of the response rate. This proves that family planning communication has improved knowledge of the health program, but to a low extent.

Table 6: Family Planning Options Available to Respondents

S/N	Elements of scale	Response in Mean Score SA	A	D	SD	WMS	Decision
6a.	Condom	628	453	68	29	3.17	Accepted
6b.	Oral pill	480	426	150	34	2.93	Accepted
6c.	Inject able	404	441	198	22	2.87	Accepted
6d.	Implant	352	411	243	65	2.88	Accepted
6e.	Intra Uterine Device (IDU)	176	204	302	108	2.12	Rejected
6f.	Sterilization	204	189	270	122	2.11	Rejected

6g.	Natural Method	764	531	4	1	3.50	Accepted
6h.	Lactational Amenorrhoea Method (LAM)	220	213	228	131	2.13	Rejected
6i	Emergency Contraceptive	248	252	218	111	2.23	Rejected

The analysis of family planning options in table 6 shows that respondents are familiar with five out of nine methods**.**

Table 7: **Family Planning Methods Adopted by Respondents**

S/No	Option	No of Persons (371)	Percentage(100%)
7a.	Condom	177	48%
7b.	Oral pill	109	29%
7c.	Inject able	79	21%
7d.	Implant	80	22%
7e.	Intra Uterine Device (IUD)	0	0%
7f.	Sterilization	0	0%
7g.	Natural Method	209	56%
7h.	Lactational Amenorrhoea Method	19	5%
7i.	Emergency Contraceptive	16	4%

Table 7 shows the frequency of family planning adoption. Item 7g. has the highest influence on the distribution table, with a total response of 261, representing 56%, which is a proof that amongst the variables, the natural method is the most adopted.

Table 11: **Analysis Showing Extent of Family Planning Decision/Adoption**

S/No	Option	No	Percentage
8a.	Very High Extent	66	18%
8b.	High Extent	79	21%
8c.	Low Extent	145	39%
8d.	Very Low Extent	81	22%
	Total	371	100%

Table 8 shows the extent family planning messages influenced attitude of respondents in making decisions towards adopting family planning methods. Item 8c has the greatest influence on the scale with 145 respondents, representing 39% of the response rate. This affirms that family planning messages, to a low extent, influence decisions and adoption rate.

Focus Group Discussions

Item 1: **what is current public perception of family planning communication campaigns?**

From the discussion it was established that participants expressed mixed feelings about the family planning communication campaigns. Though, keenly interested in health messages, they believe that many rural dwellers are hesitant to use modern family planning methods due to concerns about potential side effects, fueled by misinformation. Discussants also assert that cultural beliefs play key roles, as it is believed that having many children in a way of increasing workforce and also a sign of wealth. Most importantly, they revealed that women in rural areas often face opposition from their partners or family members, who may see family planning as a means of promoting extramarital affairs or reducing family size, owing to the fact that women have age limit in terms of child bearing.

Item 2: Has communication campaign on family planning increased knowledge/awareness?

Participants agreed that family planning communication campaigns have significantly increased knowledge and awareness on reproductive health in general, through various strategies like the use of both the English language and vernacular,; sharing real-life stories and testimonials,; using images and graphics to convey information, especially to those with low literacy level, using the media; sometimes engaging with the community to promote discussions.

Item 3: Has communication campaigns influenced attitude towards family planning decisions/ adoption

Discussants believed that family planning communication campaigns have shown some degree of positive influence on attitude towards family planning decisions and adoption by increasing knowledge about family planning methods, leading to a significant impact on understanding and adoption. However, they mentioned misconception and fear of side effect, spousal disapproval and cultural beliefs as factors militating against attitude change and adoption of modern family planning methods; resulting to indecision and slow adoption rate.

Discussion

1. **What is the current perception of couples on the family planning communication messages?**

Table 1 shows the frequency in which respondents are exposed to family planning messages. Item (1c) has the highest frequency of 135 representing 36% proving that respondents are not frequently exposed to such communication messages, but, followed by 109 (29%) respondents who rarely get the message. On where they get the message, majority of the respondents on the likert scale (3.16) accepted receiving family planning messages through health facilities/ primary health workers, followed by banners/ flyers from health facilities (3.16) and from radio their sets (3.05), as against the billboard (1.78), the newspaper (2.04), social media (2.06) and television (2.23). This proves that respondents get family planning communication messages through limited channels. Table 3 shows respondents perception of family planning messages. Item (3c) has the highest influence on the scale with 210 respondents representing 56%; which proves that respondents have mixed feeling on family planning communication campaigns.

Qualitative data from the focus group discussion revealed that participants expressed mixed feelings about the family planning communication campaigns due to misinformation and fear of possible side effects of the modern family planning methods. Discussants also assert that cultural beliefs play key roles, as it is believed that having many children in a way of increasing workforce and also a sign of wealth. Most importantly, they revealed that women in rural areas often face stiff opposition from some partners, who may see family planning as waste of time, owing to the fact that women have age limit in terms of child bearing.

2. **To what extent have the communication messages on family planning increased knowledge/awareness?**

Table 4 shows the perceived extent of respondents' awareness on family planning programmes. Item 4c has the greatest influence on the scale with 128 respondents, representing 35% of the response rate. It proves that family planning communication increased awareness, but to a low extent. Table 5 shows the perceived level of respondents' knowledge on family planning programme, through communication messages. Item 5c has the greatest influence on the scale with 141 respondents, representing 38% of the response rate. These proved that family planning communication campaigns have improved knowledge of reproductive health on a low scale.
In support of this discussion, there is a report that contraceptive use has increased in many parts of the world, especially in Asia and Latin America, but continues to be low in sub-Saharan

Africa. Globally, use of modern contraception has risen slightly, from 54% in 1990 to 57% in 2012. Regionally, the proportion of women aged 15–49 reporting use of a modern contraceptive method has progressed minimally between 2008 and 2012. In Africa it went from 23% to 24%, in Asia it has remained at 62% (WHO 2014).

Qualitative data from the focus group discussion also proved that participants agreed that family planning communication campaigns have significantly increased knowledge and awareness on family planning in particular and reproductive health in general, through various strategies like the use of both the English language and vernacular,; sharing real-life stories and testimonials,; using images and graphics to convey information, especially to those with low literacy level, using the media; sometimes engaging with the community to promote discussions.

3. **To what extent has communication messages influenced attitude towards family planning decision/adoption**

The analysis of family planning options in table 6 shows that respondents are familiar with five out of nine methods, which natural method, oral pills, implant, injectable and condom. Table 7 shows the frequency of family planning adoption. Item 7g. has the highest influence on the distribution table, with a total response of 261, representing 56%, which is a proof that amongst the variables, the natural method is the most adopted. Table 8 shows the extent family planning messages influenced attitude of respondents in making decisions towards adopting family planning methods. Item 8c has the greatest influence on the scale with 145 respondents, representing 39% of the response rate. This affirms that family planning messages, to a low extent, influence decisions and adoption rate.

According to WHO (2014), family planning indices in Nigeria are presently very poor with Total Fertility Rate at 5.5, any method of Contraceptive Prevalence Rate (CPR) at 15% (10% modern methods and 5% traditional methods), high family planning knowledge (any method 85% female and 95% male, modern method 84% female and 94% male) and high unmet need for Family Planning at 16%. Currently, about 84% are non-users of Family Planning methods. Qualitative data from the focus group discussion proved that family planning communication campaigns have shown some degree of positive influence on attitude towards family planning decisions and adoption by increasing knowledge about family planning methods, leading to a significant impact on understanding and adoption. However, they mentioned misconception and fear of side effect, spousal disapproval and cultural beliefs as factors militating against

attitude change and adoption of modern family planning methods; resulting to indecision and slow adoption rate.

Summary

The following are the summary of the findings:

1. The perception of couples on the family planning communication campaigns is that of mixed feeling
2. Communication campaigns on family planning, to a low extent, has improved knowledge and awareness
3. Communication messages exerted little influenced on attitude towards family planning decision, thereby creating a gap between knowledge and adoption.

Conclusion

This mixed-methods study demonstrates that family planning communication campaigns in Etche and Omuma LGAs have achieved moderate exposure but have not significantly closed the awareness and adoption gap. Although nearly half of couples are aware of campaign messages, their translation into improved knowledge and favourable attitudes remains inconsistent, with mixed feelings (40%) and low adoption in many households.

The study concludes that for family planning interventions to be more impactful, campaigns must move beyond information dissemination towards context-sensitive, couple-focused communication strategies. Strengthening media penetration in semi-urban areas, incorporating culturally resonant messaging, and involving men, community influencers, and religious leaders will be essential. These findings offer actionable insights for state health planners, NGOs, and policymakers to refine the next phase of family planning communication in Rivers State and similar contexts.

Recommendations

1. There should be a holistic review of the family planning communication campaigns, to deepen understanding, with special focus on value reorientation in the rural communities to clear doubts and misconception about family planning messages.
2. Family planning communication campaigns should be reinforced, leveraging on multiple media platforms, including interpersonal communication for increased awareness and maximum impact.

3. There is need to involve more men in family planning campaigns, which helps in attitudinal change, promoting joint decision making, overcome partner disapproval, to increase the rate of adoption of modern family planning.

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