

**THE EFFECTS OF MODERN FAMILY PLANNING METHODS ON THE
CURRENT POPULATION: A CASE STUDY OF KAMUDA SUB-COUNTY,
SOROTI DISTRICT**

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**UGANDA CHRISTIAN
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DECLARATION

I, Lumumba Olga Joy, declare that this dissertation titled “THE EFFECTS OF MODERN FAMILY PLANNING METHODS ON THE CURRENT POPULATION: A CASE STUDY OF KAMUDA SUB-COUNTY, SOROTI DISTRICT” is my original work and has not been submitted to any institution for any academic award.

All sources of information used in this study have been duly acknowledged.

This dissertation is submitted to Uganda Christian University in partial fulfillment of the requirements for the award of a Bachelor’s Degree in Social Work and Social Administration.

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APPROVAL

This dissertation titled “THE EFFECTS OF MODERN FAMILY PLANNING METHODS ON THE CURRENT POPULATION: A CASE STUDY OF KAMUDA SUB-COUNTY, SOROTI DISTRICT” has been submitted to Uganda Christian University for examination with my approval as the University Supervisor.

Supervisor’s Name: Dr. Winfred Naamara

Signature: _____

Date: 14/05/2026_____

DEDICATION

I dedicate this report to my uncle Mr. Emalu Benard Matthew, my mother Eilu Alice, my grandfather, Eilu Andrew Benjamin, my grandmother, Eilu Christin for the spiritual, financial, moral, social support and encouragement offered to me during my Education.

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ABSTRACT

This study examined the effects of modern family planning methods on the current population in Kamuda Sub-County, Soroti District. The study aimed to assess the influence of family planning on population growth, maternal health, and socio-economic wellbeing.

A cross-sectional research design was used, and data were collected from 80 women aged 15–49 years in Amini Parish using questionnaires and interview guides. Both qualitative and quantitative methods were used in the analysis.

The findings showed that modern family planning methods have helped reduce unplanned pregnancies, improve maternal health, and promote better child spacing. However, challenges such as limited awareness, cultural beliefs, and fear of side effects still affect their usage.

The study concluded that family planning plays a key role in improving living standards and controlling population growth. It recommends increased sensitization and improved access to family planning services.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This study will investigate the influence of modern family planning methods on current population in Kamuda sub-county, Soroti District. This Section present the background to the study, statement of the problem, general objectives, specific objectives of the study, research questions, significance, scope, operational definitions of terms and concepts.

1.1 Background to the study

Globally, Family Planning is a very good strategy for regulating fertility. A low fertility rate implies that the rate of population growth is slowed down. Its efficiency in improving public health outcomes has been noted for some time now and it is regarded as being very cost-effective (WorldBank, 2017). Family planning gives people the freedom to decide whether to conceive, space their children or delay having children in the future. The problems that give rise to the failure to satisfy the demand include inaccessibility to the service, ignorance about the service and fear about possible side effects (Simsek B, 2013).

In Africa, most women tend to bear more children than they want to. This is evidenced by women from countries such as Senegal and Ethiopia who bear about two children above their ideal number. It can be concluded that the closer the wanted and achieved fertility numbers become, the more couples have accomplished their objectives when it comes to fertility levels (Darroch JE, 2018). However, in the case of countries such as Burkina Faso, women continue to desire large families. Although most countries have increased the use of contraceptives, fertility levels have decreased very slowly.

As of 2007, the estimated population of Uganda stood at thirty million people and assuming that it continues at the same pace, the projected population of Uganda is expected to rise to fifty-five million people by the year 2025 and reach a hundred and thirty million people by the year 2050.

There might be many reasons behind the rapid rise in the population, but one needs to focus on the extremely high total fertility rate of six-point-nine births per woman in the year 2001 and six-point-seven births per woman in the year 2016 (UDHS, 2016/2017). It is due to the contraceptive usage rate, which is as low as twenty-four percent.

With respect to the case study, Soroti District, reproductive health demands special consideration owing to the fact that it is a very sensitive aspect of public health. It is estimated that a lack of one million dollars worth of assistance towards reproductive health commodities translates to 360,000 cases of unwanted pregnancies, 150,000 induced abortions, 11,000 infant deaths, and 14,000 under-five child deaths (UNFPA, 2016). This scenario demonstrates the significance of contraceptive use within reproductive health. For instance, in Uganda, 41% of women lack access to contraceptives and the maternal mortality rate (MMR) is 435 deaths per 100,000 live births while only 10% of the budget is allocated towards health care services (WHO, 2015; MOH, 2014).

1.2 Statement of the problem

Unmet need of family planning among the least developed countries is regarded as one of the biggest challenges to the development of people living in such nations, particularly the vulnerable segments of society such as women and children. The multiplicity of issues, together with the complexity of environmental factors concerning access, influence on decisions about health services, as well as contraceptive methods, despite thorough investigations conducted by numerous scholars, has yet to be fully controlled.

Family planning appears to have a poor uptake since the prevalence rate of contraception in the sub-county stands at 24% as of 2017. According to statistics, the population of Kamuda Sub-county between 2000-2004 was 18,480, 2005-2008 was 25,042, 2009-2012 was 26,913 while between 2013 to the present is 28,618 (UBOS and ICF, 2018). Therefore, there is continued low access to and use of family planning services coupled with the high unmet need for family planning of 41% nationwide.

Despite the positive trend in the family planning indicator, total fertility rate, and contraceptive prevalence in Kamuda sub-county, the issue of reaching out to more women who wish to either limit or space their births remains an ongoing problem. Not using contraceptives among these

women has an equally adverse impact on their overall well-being and that of their offspring. Many programs and efforts to improve the availability and usage of contraceptives in Uganda have occurred in the past decade. Thus, this particular study seeks to highlight the impact of modern family planning services on the present population, specifically focusing on Kamuda Sub-county

1.3 Purpose of the study

The purpose of the study is to investigate the effects of modern family planning methods on the current population in Soroti district particularly Kamuda sub-county

1.4 General Objective

To examine the effects of modern family planning methods on the current population among women of reproductive age (15–49 years) in Aminit Parish, Kamuda Sub-County, Soroti District.

1.5 Specific Objectives

The study will at achieving the following:

- i. To identify the types of modern family planning methods used by women of reproductive age in Aminit parish Kamuda Sub-County.
- ii. To assess the level of utilization of modern family planning methods among women of reproductive age in the Aminit Parish.
- iii. To examine the effects of modern family planning methods on population outcomes, such as birth rates, family size, and child spacing, among women of reproductive age in the Aminit Parish

1.6 Research Questions

The Research Questions that will be asked include:

- i). What are the contemporary family planning techniques employed in Kamuda sub-county, Soroti district?
- ii). What is the population of Kamuda sub-county in Soroti district?
- iii). What are the impacts of family planning techniques on the population of Kamuda sub-county in Soroti district?

1.7 Scope of the study

The scope of the study will involve: Subject scope, Geographic scope and time scope.

1.7.1 Subject Scope

The subject scope will generally focus on the influence of modern family planning methods on current population in Soroti District particularly in Kamuda sub-county looking at the different family planning methods used.

1.7.2 Geographical scope

The study will be carried out at Kamuda Sub-county located in Soroti District. The researcher will choose this area because of easy accessibility and availability of information concerning the concept of modern family planning methods which has a lot to do with current population and it is near the researcher's home.

1.7.3 Time scope

The literature of this study will cover for the last 7 years; from 2013 to 2019 and anything beyond this period will be left out. This will be due to data availability and comparison. This is also considered a period good enough to enable the researcher acquire the necessary information in line with the study.

1.8 Justification of the Study

The research will provide information that will inform the decision making of couples concerning the number of children they would like to conceive and the age gap that should separate each of them. This planning will ensure that motherhood and childbirth are more enjoyable as mothers and children benefit from family planning through birth spacing.

This research will provide information that will help in reducing unplanned pregnancies and maternal death caused by unsafe abortion carried out by quack health practitioners.

The study will assist both locals and policymakers to establish the important concerns regarding poor contraceptive usage among young people and hence devise ways to overcome the challenge.

The study aims at providing a solution in form of an action plan for the local government and the Ministry of Health of Uganda towards solving the prevailing challenge of lack of contraceptive needs in the country, especially the high rate of teenage pregnancies and other related challenges like infant and maternal death.

1.9 Significance to social work practice, to policy and research

The findings of the study will be significant on the following ways;

This study is significant to social work practice because it provides a strong evidence base for policy advocacy in reproductive health. By examining the effects of modern family planning methods on population growth in Kamuda Sub County, the research generates data that social workers can use to influence local government and non-governmental organizations. In other instances, where the research results show that family planning lowers fertility rates and alleviates domestic burdens, then social work interventions can call for policy change towards the availability of birth control. The effectiveness of social workers as change agents will be evident through the implementation of favorable policies.

Also equally critical, the research contributes to the efforts in community education and awareness programs. Social workers find themselves in a position where they have to help in clearing myths and stigma associated with family planning. The evidence in the research may be used to identify areas in which there is lack of information, thus informing social workers about how to conduct educational campaigns. The results of the research will inform the messages conveyed to people in order to change negative practices like teenage pregnancies.

Furthermore, the research adds weight to efforts by social workers in making family and households more stable. Through adoption of modern family planning techniques, families will learn on how best to plan resources, invest in education and raise children successfully. This, therefore, means that social workers can help families attain sustainable livelihoods and avoid poverty.

The study further brings out the role of culture in making decisions regarding family planning programs. Social workers will find it necessary to take into account cultural perceptions of family planning within communities. With the identification of these cultural aspects, social workers are able to develop cultural-sensitive intervention programs that integrate traditions with health concerns. This approach guarantees acceptance from the community.

Lastly, the study provides an opportunity for social workers to benefit professionally. It helps in building their knowledge in various areas related to reproduction and community development. This enhances their competency as social workers to face emerging challenges in society.

1.9.1. Significance to research

The importance of the study rests in the value it adds to existing literature on the topic of family planning in modern society, as well as its impact on population trends. Research is important because of how it contributes to theory formation and provides solutions to real-life problems. As stated by Hassan (2024), "the importance of a study shows how much it contributes to existing knowledge about a subject as well as the important social concerns that it addresses." With regard to Kamuda Sub County, this study reveals the impact of family planning on fertility levels, family welfare, and population trends. Being conducted in an underdeveloped area in Uganda, this study

addresses a gap in literature, which tends to focus on urban settings and statistical figures at the national level.

Furthermore, this research helps fill a research gap and show relevance in academia. According to Wojcik (2025), one way of showing relevance is by making sure that one can clearly explain the relevance of his/her study in academic as well as practical terms. The current study helps fill an existing gap as far as empirical evidence about how modern contraceptives are embraced in rural societies is concerned. It is important to note that adoption of contraceptives in rural settings depends greatly on a number of social and economic issues. In addition, the results of this research will be applicable not only to social work but also to other areas like sociology and development studies.

Finally, the importance of this research lies in its guaranteeing the practical impact of academic investigation. According to Enago Academy (2025), it is essential to discuss the significance of a study since this will make it more meaningful for readers, grab their attention, and ensure the impact of the research. Indeed, the significance of the research in question is provided through its contribution to social transformation since it will be used to inform policy making, shape interventions of social workers, and design educational projects for communities.

In conclusion, the significance of the paper at hand can be summarized as follows: first, the research adds knowledge in the field of studies and helps address context-specific issues; second, the research increases the relevance of family planning and population management since it is multidisciplinary; third, the research promotes social transformation.

1.9.2. Significance to policy.

The importance of the study in relation to policy is the provision of evidence-based data useful in making decisions on reproductive health and population control. According to Cooper (2024), the greatest importance of research in policy formulation is when research makes complicated social problems easier to understand and act upon. In his discussion on research papers as tools that make empirical evidence operational in policy formulation, Cooper (2024) suggests that research papers help policy makers understand how to solve societal problems. Through analyzing the impact of

new forms of family planning services in Kamuda Sub County, the study develops evidence-based knowledge that is critical in informing the formulation of policies aimed at solving problems in rural areas.

Another major importance of this study is how it helps address the disconnects that can arise between policy and real-life situations. Policy is doomed to failure if it does not align with the lives of those it seeks to serve. Example: Tseng (2012) observes that researchers have to translate what they find in their studies so as to help policymakers understand what it means. This will enable policymakers to develop appropriate family planning programs that are culturally relevant to the area where it is intended to be applied. In conclusion, the study ensures that the policies on reproductive health are both sound and practical in rural Uganda.

In addition, the research is important in the sense that it helps in the realization of sustainable development through evidence-based policy. Good policies depend on data either supporting or refuting innovations in health and development. The significance of research in making policies has increased because of the fact that policies are based on evidence for achieving sustainable economic development and poverty alleviation (The Relevance of Research to Policy, 2019). By demonstrating the relationship between the use of new contraceptives and fertility levels as well as the wellbeing of the family members, the research provides policymakers with the information required in implementing reproductive health policies.

1.10 Limitation of the study.

In the process of conducting this research, the researcher is bound to come across the following challenges that are likely to impact on the final outcome.

Firstly, this research will be quite costly since it will involve costs related to stationery, printing, and transportation.

Time will be one of the key constraints to the researcher since it will entail a great deal of hard work.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter serves as the basis upon which the effects of family planning practices on reproductive health and population trends will be understood. This chapter reviews various sources such as journals, reports, and theories relating to women aged between fifteen and forty-nine years, inclusive. The review gives an idea of the extent to which knowledge of this topic exists.

2.1 Types of Modern Family Planning Methods Used

Modern family planning techniques are accessible to women of reproductive age in Uganda, although their usage varies between rural and urban areas. According to the UDHS 2022, 31% of women of reproductive age use modern contraception, with the most commonly used methods being injections (13%), implants (6%), oral pills (5%), condoms (4%), and intrauterine devices (2%) . Alege et al. (2016) found that rural women preferred injections because of their easy use and accessibility in local health facilities. Short-term contraceptive methods are more prevalent since they are easily accessible and need less specialist training. Long-lasting contraceptive methods like implants and IUDs are not utilized adequately due to misconceptions, apprehension of adverse effects, and a lack of trained professionals. Condoms are culturally perceived to be the domain of promiscuous individuals, making married women reluctant to use them. This study will examine the kinds of modern family planning techniques available in Aminit Parish.

2.2 Awareness and Utilization of Modern Family Planning Methods

The level of awareness on family planning in Uganda is quite high, but utilization remains very low in many families, especially those located in rural areas. According to UDHS (2022), 98% of all women within reproductive ages are aware of at least one modern contraceptive technique, although only 30% of married women utilize it. According to Namuliira et al. (2022), awareness of family planning has grown through campaigns, but utilization is limited by various socio-economic and cultural factors. For example, utilization of such practices has been found to depend heavily on income, education, and support from partners, with cultural disapproval and fears

related to adverse side effects being some of the main reasons why people avoid such contraception techniques. In an investigation carried out in Eastern Uganda, it emerged that the involvement of men had a significant impact on increasing the level of utilization among rural women. This paper seeks to explore the degree of awareness and utilization of modern family planning techniques among households within the Aminit Parish community.

2.3 Effects of Modern Family Planning Methods on Fertility Rates and Population Growth

Modern family planning methods have a significant impact on fertility rates, family size, and trends in population growth. Fertility rates in Uganda remain high, averaging 5.2 children per woman, even with family planning initiatives (World Bank, 2023). It is documented that contraception helps reduce unwanted pregnancies, improve women's health status, and contribute positively to the survival of the children by ensuring adequate birth spacing (WHO, 2021). The UNFPA (2020) made it clear that increasing family planning was crucial to controlling Uganda's fast-growing population. Through family planning, fertility is reduced, and proper birth spacing promoted which contributes to the process of demographic change and household improvement. With smaller family sizes, families can invest in the development of their children in education and proper health care, breaking the cycle of poverty. Research conducted in rural areas in Uganda found that households using family planning had improved nutritional status for their children and school attendance in comparison with families with large families.

2.4 Theoretical Framework

The theoretical framework is the basis through which we understand how modern family planning practices impact the health and wellbeing of reproductive-age women as well as the entire population. There exist general theories that are instrumental in understanding the relationship between awareness and utilization of family planning methods and the subsequent effects on fertility levels and population trends. For this study, different theories have been incorporated within the field of demography, health behavior, and other social sciences so as to examine both the individual and communal determinants of family planning practices in Aminit Parish.

1. Demographic Transition Theory (DTT)

This theory shows the process through which populations move from high fertility and mortality levels to low levels during the modernization period. According to Caldwell (2001) and Notestein (1945), one of the key factors affecting fertility reduction is family planning, particularly in the sub-Saharan parts of Africa that experience lower rates of modernization. In Uganda, the current fertility level stands at 5.2 births per woman, but those areas with relatively high contraceptive prevalence display some evidence of the demographic transition. In the case of Aminit Parish, the adoption of modern family planning practices can be viewed as means for accelerating demographic transition through reduction in fertility, birth-spacing, and population growth. This is in line with Objective iii (looking at its impact on fertility and population growth).

2. Health Belief Model (HBM)

According to the Health Belief Model, individual health practices like contraception are determined by an individual's perception of the risk, benefits, and barriers. HBM was established by Rosenstock (1974) to describe the individual's preventive health practices. Research conducted in Uganda indicates that women's adoption of contraceptive use is based on the perceived risks of unwanted pregnancies, perceived benefits of spacing children, and perceived barriers including side effects or disapproval from partners (Kabagenyi et al., 2016). In Aminit Parish, the knowledge of family planning methods (Objective ii) will not be sufficient for contraceptive practice; however, the women's perceptions of risk and benefits will influence their practice of contraceptive use. For instance, when there is fear of side effects or disapproval from husbands, then women will not practice contraceptive use regardless of their knowledge about it.

3. Social Ecological Model (SEM)

The social ecological model identifies the many factors that impact health behaviors at different levels of influence, including individual, interpersonal, community, and policy. According to McLeroy et al. (1988), reproductive health behaviors are determined not just by personal knowledge but also by family beliefs, community attitudes, and organizational structures within the healthcare system. Research done in Uganda supports the fact that male partner support,

religious beliefs, and easy access to health facilities all have an effect on women using contraceptives (Nansubuga et al., 2020). Modern family planning practice in Aminit Parish will be determined not only by personal knowledge but also by spouse acceptance, community attitude towards number of children, and availability of contraceptives from the government (Objective ii).

4. Theory of Planned Behavior (TPB)

According to TPB, intention is what influences behavior, and that intention arises from attitudes, subjective norms, and perceived behavioral control. TPB was created by Ajzen (1991) in an effort to understand decisions. In a study conducted in Uganda, it is evident that women's attitude towards contraceptive, social pressure from their husbands or elders, and access to health facilities influence the adoption of contraception (Asiimwe et al., 2019). As far as women who are of reproductive age within Aminit Parish are concerned, intention to use contraception would depend on their attitude towards family planning, community norms, and perceptions of capability of accessing health care facilities.

2.5 Summary

Based on existing literature, there are various family planning practices that are currently being used to regulate fertility among couples, yet there is little evidence of usage and adoption in Uganda owing to socio-economic and cultural constraints. There is strong evidence that family planning plays a significant role in reducing fertility and improving the economic status of families, although there are no localized studies from communities like Aminit.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This section details the methodology that will guide the research process and includes Research Design, Population under study, Sampling design, Sample Size, Sources of data, Methods and Instrumentation for data collection, Data Control, Data Analysis, Ethical Issues and Limitations.

3.1 Research Design

A qualitative research methodology will be used in conducting the research because the researcher wants to explain in an unbiased manner the entire procedure that he used for conducting the research while at the same time making use of a cross-sectional design due to the relatively short time period involved in the study.

3.2 Study population

The research will target women of reproductive age who are between 15 and 49 years old and live in Kamuda Sub County, Soroti District. Reproductive age is recognized globally as an important age group for assessing the influence of family planning on fertility and demography (World Health Organization, 2020).

In all, 100 people will be chosen to take part in the research. This number is sufficient for the conduct of a case study. It provides enough room for proper analysis while not overburdening the researcher with the amount of information to process. The chosen respondents will come from various villages in Kamuda Sub County.

In studying the role of family planning in Kamuda Sub County, the target population was chosen based on its relevance to the topic under investigation. Women of reproductive age are more likely to use contraceptives and thus can be considered the most important participants in the research.

3.3 Sample Size

For data collection, purposive sampling technique will be used where data will be obtained from 20 respondents. The number of respondents will be appropriate for this research since it will

provide enough information concerning existing methods of family planning in Kamuda Sub-county.

3.4 Data collection instruments

These are instruments that will help the researcher to obtain the required information. They will include the self-administered questionnaire and interview guides.

3.5.2 Interview guides

Interviews are a qualitative research method that involves direct, face-to-face or mediated interaction between the researcher and participants, with the aim of collecting detailed information about their experiences, perceptions, and attitudes. An interview guide is a structured or semi-structured set of questions prepared in advance to ensure that the discussion remains focused on the research objectives while still allowing flexibility for participants to express themselves freely.

Interviews will be very helpful in this study since they will provide the researcher with comprehensive data by enabling the researcher to collect extensive information from reproductive-age women in Kamuda Sub County. As compared to questionnaires, interviews make it possible for the respondents to explain more about their experiences when it comes to modern methods of family planning, problems that they encounter, and other social or cultural factors that determine their decision-making processes.

Additionally, interviews promote the development of rapport between the researcher and the respondents. Considering that the research subject is sensitive, the use of interviews makes it easier for the respondents to express their views since this methodology promotes a one-on-one interaction between the two parties involved. The researcher will adopt a semi-structured interview technique.

3.6 Study area

This study will take place in Aminit Parish which is found in Kamuda Sub-County, Soroti District, Eastern Uganda. Aminit Parish has been chosen due to its nature as a representative rural setting in Soroti District. Socioeconomic practices in Aminit Parish include subsistence farming and small scale business. The delivery of healthcare services and modern family planning is done in health centers in the parish. It is therefore appropriate for the study since it will help in the analysis of the influence of modern family planning on the existing population in the study area.

Choosing only one parish will enable the researcher to conduct an extensive investigation of the research questions.

3.7 Study Population

The population of the study will be made up of women who can reproduce and are of ages ranging from 18 to 45 years. This age range was chosen because it reflects the most productive ages where family planning decisions play a very significant role concerning fertility, household welfare, and demographic changes.

In order to achieve the purpose of the study, a total of 100 individuals (in this case women) will be identified to be interviewed in the study. This number of subjects will be deemed appropriate enough considering that this case study design does not require a large number of participants. They will also be recruited from various villages in Aminit Parish.

This particular age bracket of women is necessary in the study since they are the most important when it comes to the subject being studied in this research.

3.8 Sources of Data

For data collection purposes, both primary and secondary sources shall be utilized. These will assist in making sure that a researcher collects adequate data for the study.

3.8.1 Primary Data

Primary data; this refers to data that have been obtained directly through firsthand observation or experience in the field (Ahuja, 2001). The primary data source will include the use of field research

whereby the researcher will formally interact with the selected respondents of the study using structured questionnaires. These questionnaires will be administered to the selected respondents, who will be given an hour to respond.

3.9 Data Analysis

Thematic analysis is a dynamic analytical technique aimed at identifying the patterns in data. Braun and Clarke's six-stage methodology (2006) is considered an effective framework for analyzing qualitative data, which can be modified for the quantitative data by coding responses into relevant themes. Therefore, this methodology will be used to analyze the quantitative data gathered from reproductive-age women of Aminit Parish in order to make meaningful conclusions from the statistical results.

The first step of this process is data familiarization. According to Braun and Clarke (2006), researchers should become deeply immersed in their datasets in order to gain knowledge about all the aspects of the data collection. For this research, it means going through the quantitative responses multiple times to detect the initial themes in the collected data.

In the second stage of analysis, the researcher generates initial codes. The coding of data consists of sorting the gathered information into specific groups. This step is described as being very important in the framework suggested by Braun and Clarke (2006). Quantitative results will be categorized using codes like "awareness," "utilization," "barriers," "and perceptions."

The third stage is developing themes. Themes refer to wider ideas and patterns that can be extracted from the coded data, according to Braun and Clarke's thematic analysis method. For instance, codes like "lack of access," "high costs of services," and "distant location of health facilities" can be classified under the theme "barriers to family planning."

The fourth stage is reviewing themes to enhance the quality of the analysis. According to Braun and Clarke (2006), themes should be reviewed to ensure that they accurately represent the data. This can be achieved by comparing the themes and the coded data as well as the whole dataset. For instance, in this research, the themes developed will be compared with the quantitative findings to validate their accuracy and appropriateness.

The fifth stage of thematic analysis is defining and naming themes. Every theme needs to be clearly described. The significance of defining themes is emphasized by Braun and Clarke (2006), who note that it is necessary for coherent analysis. For instance, a theme can be defined as "cultural factors affecting family planning" to clarify its meaning and relevance.

The last step involves the creation of the report. According to Braun & Clarke (2006), the report needs to show a good story backed up by data extracts. The quantitative data will be provided in tables and graphs while interpretations in the form of themes will highlight the social significance of numbers.

Conclusion

Finally, through the use of the six-step process outlined by Braun & Clarke (2006), the study will create themes from quantitative data to interpret the impact of modern family planning in Aminit Parish. The advantage of using Braun & Clarke's model is that findings will be socially contextualized and will add social significance to numerical data.

3.10 Ethical Consideration

The researcher will seek authorization to gather data from the university administration. The researcher will assure confidentiality to the respondent with respect to the information to be gathered. To ensure quality control, the researcher will conduct proofreading of the primary data to avoid any kind of misinterpretation or repetition. Furthermore, the rationale behind conducting the research will be communicated to the respondents prior to conducting interviews.

3.11 Research procedure.

As part of the process, it is important to note that while in the institute, the recommended researcher should come up with a topic of her own to be approved by the respective department. After that, the researcher is supposed to come up with a research proposal that outlines what the research entails. This is to enable the testing the skills of the individual as far as conducting real research on the topic is concerned. Subsequently, the research proposal will be approved, and then the researcher allowed to go to the field.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.1 Introduction

Chapter Four presents, analyzes, and interprets the findings obtained from the field study conducted in Kamuda Sub-County, Soroti District. The data were collected using demographic questionnaires and semi-structured interviews administered to women aged 15–49 years. The purpose of this chapter is to present the results of the study and provide an analysis of the responses gathered from the participants in relation to the research objectives.

The findings are organized according to the specific objectives of the study. The chapter first examines the level of awareness of modern family planning methods among women in Kamuda Sub-County. It then explores the types of modern family planning methods available and the extent of their utilization among the respondents. In addition, the chapter analyzes the effects of modern family planning methods on population outcomes and finally discusses the barriers and challenges that affect the use of modern family planning methods in the study area.

4.2 Response Rate

This section presents the number of respondents who participated in the study compared to those targeted.

Table 4.1

Category	Targeted Respondents	Actual Respondents	Response Rate (%)
Women (15–49 years)	20	30	100%
Key Informants	3	3	100%
Total	23	23	100%

Source: Primary Data

The study targeted a total of 23 respondents, including 20 women of reproductive age (15–49 years), representing 87% of the respondents, and 3 key informants, representing 13%. All the targeted respondents participated in the study, giving a 100% response rate. This high response rate indicates that all selected participants were willing to take part in the study and provide the required information. The full participation ensured that adequate and complete data were collected for analysis and interpretation. As a result, the findings of the study are considered reliable and representative of the sampled respondents regarding awareness, utilization, effects, and challenges of modern family planning methods in Kamuda Sub-County.

Table 4.2 Age Distribution of Respondents

Age Group	Frequency	Percentage (%)
15-19	2	10%
20-24	4	20%
25-29	5	25%
30-34	4	20%
35-39	3	15%
40-44	1	5%
45-49	1	5%
Total	20	100%

Source: primary Data

The findings show that the largest proportion of respondents 25% (5 respondents) were aged 25–29 years, indicating that most participants were in their prime reproductive age. Respondents aged 20–24 years and 30–34 years each represented 20% (4 respondents), showing a significant number of women in early and mid-reproductive stages. Furthermore, 15% (3 participants) were between 35 and 39 years old, while 10% (2 participants) were between 15 and 19 years old. Participants who were 40 to 44 years old and those aged between 45 and 49 years made up only 5% (1 participant) each.

All things considered, it can be said that most of the participants surveyed belonged to the age group of 20 to 34 years, an active reproductive age.

Table 4.3 Marital Status of Respondents

Marital Status	Frequency	Percentage (%)
Single	3	15%
Married	14	70%
Divorced	2	10%
Widowed	1	5%
Total	20	100%

Source primary Data

Analysis of marital status reveals that the majority of the participants, 70% (14 out of 20), were married, which means that the majority of women in Kamuda Sub-County reside in unions in which decision-making concerning childbearing and the use of modern family planning techniques is likely to be made together with the husband. The cooperation and mutual understanding between spouses, thus, are key factors when it comes to the acceptance and regular practice of family planning techniques. Single women constituted 15% (3 respondents) of the sample population, which suggests that single women are not unaware of modern family planning techniques and have interest in managing their reproductive health. In addition, 10% (2 respondents) were divorced, and 5% (1 respondent) was widowed, meaning that some women who were either divorced or widowed might face certain social, economic, or cultural barriers that prevent them from seeking family planning services.

Table 4.4 Level of Education

Education Level	Frequency	Percentage (%)
No Formal Education	3	15%
Primary education	9	45%
Secondary	6	30%
Tertiary	2	10%
Total	20	100%

Source primary Data.

Results from the level of education of the respondents reveal that the majority, accounting for 45% (9 out of 20 respondents), attained primary education, meaning that almost half of the women in Kamuda Sub-County can read and write. Primary education might be a determinant of the uptake of modern family planning practices because a woman who can read and write is better placed to understand health information. The second largest group comprises those who have attained secondary education, accounting for 30% (6 respondents). The high number implies that most women have relatively high literacy levels, and therefore, making reproductive health decisions might not pose any difficulty. On the other hand, 15% (3 respondents) had no formal education, implying that there is a section of the population that will find it difficult to access family planning information. Lastly, only 10% (2 respondents) attained tertiary education.

Table 4.5 Occupation of Respondents

Occupation	Frequency	Percentage (%)
Farming	11	55%
Business	4	20%

Formal employment	2	10%
Unemployed	2	10%
Others	1	5%
Total	20	100%

Source primary data

In terms of the occupation of the respondents, the results reveal that the most common activity among women in Kamuda Sub-County is farming at 55% (11 out of 20 respondents). This suggests that farming constitutes their main source of livelihood, and women who engage in this activity might experience constraints regarding time and finances, which would hinder their access to family planning services. The businesswomen constituted 20% (4 respondents) of all respondents interviewed, implying that some women have an independent source of income, which enhances their access to family planning services. Ten percent (2 respondents) of the respondents had formal jobs, and they constituted a small group but had steady incomes and access to health information. Additionally, unemployment among women amounted to 10% (2 respondents). Other types of employment formed 5% (1 respondent) of all the respondents' occupations. These results suggest that occupation is a crucial factor determining women's access to family planning services.

Table 4.6 Number of Children

Number of Children	Frequency	Percentage (%)
0-2	6	30%
3-4	7	35%
5-6	5	25%
7 and above	2	10%
Total	20	100%

Source Primary Data

As observed from the analysis above regarding the number of children, the majority of the interviewees had 3–4 children, comprising 35 percent of the sample group (7 out of 20 respondents). This reveals that there was an average size of family amongst the women in Kamuda Sub-county. On the other hand, those who had 0–2 children were 30 percent (6 respondents). This reveals that many women were at the initial stage of childbirth. The category having 5–6 children comprised 25 percent (5 respondents), revealing that many women had a big family size. Those with 7 or more children were 10 percent (2 respondents).

Table 4.7 Age at First Birth

Age Category	Frequency	Percentage (%)
Below 18	4	20%
18-20	7	35%
21-25	6	30%
Above 25	3	15%
Total	20	100%

Source: Primary Data

In relation to the age at which respondents gave birth for the first time, the highest percentage (35%) was recorded among the age group 18–20 years, suggesting that many women give birth when they are relatively young. Moreover, 30% of the respondents gave birth for the first time within the age range of 21–25 years, implying that a significant number of women delayed giving birth to when they were adults. Nevertheless, 20% of the respondents had their first birth before reaching 18 years, implying that there is still early childbearing among the community members. Finally, 15% of the respondents had their first births after 25 years, implying that some women delayed childbearing.

4.3 Awareness of Modern Family Planning Methods

4.3.1 Awareness of Modern Family Planning

Response	Frequency	Percentage (%)
Yes	17	85%
No	3	15%
Total	20	100%

Source Primary Data.

The research findings show that the awareness level of 85% (17 out of 20) respondents about modern family planning methods is quite high. This demonstrates the high awareness level about modern family planning methods among women in Kamuda Sub-County. It is evident that most women have received information about family planning methods either from health workers, media, or any other sources in the community. On the other hand, 15% (3 respondents) indicated that they do not have any awareness about modern family planning methods. In this case, it is clear that some women lack sufficient information about modern family planning methods.

4.3.2 Sources of Information about Family Planning

Source	Frequency	Percentage %
Health Workers	8	40%
Radio	4	20%
Friends	3	15%
Husband/Partner	2	10%
Community meetings	2	10%
Others	1	5%

Source Primary Data.

It was revealed that health workers emerged as the major source of information with regard to family planning. The data indicates that 40% (8 out of 20) of respondents gained information on family planning methods from health workers. Thus, one can suggest that there is a significant contribution made by health care institutions and professionals to women's awareness of modern family planning practices. Radio stations ranked second among sources of information as 20% (4 respondents) claimed that they had been exposed to such sources. At the same time, 15% (3 respondents) indicated friends as the medium of information. Husbands/partners and community discussions were the next in line with 10% each.

4.3.3 Understanding of Modern Family Planning

Respondents were further asked questions regarding their knowledge of modern family planning with the aim of ascertaining the views held by the women of Kamuda Sub-County concerning modern family planning. From the results obtained, most of the respondents understood modern family planning, relating it to preventing unwanted pregnancy, spacing of children, and limiting the number of children within a family. The majority of the respondents pointed out that modern family planning provides an opportunity for parents to plan when and how many children they should have based on their economic status.

Some of the respondents said that modern family planning ensures that parents do not have too many children who they cannot provide for.

Respondent 08 argued that through modern family planning, the modern couple can be able to ensure that they do not conceive several children in a short while. The respondent said that

“Family planning helps a woman not to get pregnant every year but prepares well for her children.”

This implies that some women perceive family planning as a method of managing the available resources in their homes for the benefit of their families. Likewise, Respondent 12 argued that the best thing about modern family planning is ensuring that there is good spacing between children.

This enables the mother to recover fully while the child develops well. Proper spacing enables the parent to provide sufficient attention to each of the children.

Furthermore, some respondents had an understanding of certain modern family planning methods. For example, Respondent 05 argued that one way of practicing modern family planning is through the use of different means to prevent conception. “She mentioned that such methods are offered at the health centers and by the health workers in the community.”

This indicates the significance of health institutions in teaching women about family planning. Nonetheless, it was evident that some individuals had partial knowledge of family planning.

"Respondent 03 thought that family planning is mainly meant for women who already have lots of kids and wish to stop bearing."

This suggests that some women consider family planning as a means to restrict births only and not as a strategy to space out their pregnancies or postpone their first pregnancy. Such attitudes could affect women's behavior concerning family planning programs.

Another respondent said that

"Respondent 15 felt that family planning was done mostly by married couples who wished to decrease the number of their offspring"

Although this statement shows an insight into the function of family planning, it also reveals that there are some individuals within the community who consider that family planning is meant only for certain individuals, such as married women or those with numerous children.

From the above results, it can be noted that while most respondents exhibited a fair understanding of family planning, they differed in knowledge. While most women were aware of its use in avoiding unplanned pregnancy and spacing children, there were others who did not know much about its benefits. It is important to note that these findings underscore the importance of

sensitization efforts and community education programs aimed at increasing knowledge about the significance of modern family planning practices.

4.3.4 Perceived Benefits of Family Planning

The research also investigated the views of the respondents about the merits of contemporary family planning. According to the results of the survey, most of the respondents recognized some of the strengths of utilizing family planning measures. Some of the strengths that were cited by the respondents included appropriate spacing of offspring, improvement in mothers' health status, sound financial management within families, and proper education and upbringing of children. It is clear from the responses provided by the respondents that many women in Kamuda Sub-County understand the significance of family planning.

One of the main advantages cited by several people is correct child spacing. Most respondents pointed out that family planning assists mothers not to have children too soon, giving enough gap after childbirth. For example, according to Respondent 08, “family planning allows mothers to gain energy and prepare themselves for bearing the next one.” She added,

“When there is correct spacing among the children, the mother’s health improves and she takes care of the children.”

Thus, from this statement, it is clear that some respondents know how family planning is useful for the mother’s health.

Another advantage mentioned by Respondent 11 was as follows:

“The main benefit that I know about family planning is that it allows families to plan the number of children so that they could give enough attention to all of them.”

As she claimed, having many children in a short time does not allow parents to satisfy their demands.

Another advantage cited by the respondents is the improvement of maternal health. Some of the respondents mentioned that family planning methods minimize the physical challenges involved in bearing many children. For instance,

"Women practicing family planning have no health issues because they give their body enough rest after giving birth to one baby." This statement indicates that some of the women understand that family planning leads to better maternal health. In addition, some respondents pointed out that family planning plays an important part in the effective management of finances. The following statement was made by Respondent 14 that

"Family planning enables parents to plan their children depending on their incomes and available resources."

According to her, when the number of children is reasonable, "parents can easily meet all their needs, such as feeding and clothing them."

The above response indicates that family planning is viewed as an effective approach that can help alleviate economic burden in homes. Additionally, there were a few respondents who indicated that family planning facilitates the ability of parents to ensure proper education of their offspring. For example, Respondent 17 highlighted the point that having fewer offspring enables parents to facilitate proper education of their children. Parents are able to ensure that their children attend classes regularly and are provided with proper scholastic needs. This reveals that respondents perceive family planning as an approach that enhances proper education of their offspring.

Nonetheless, even with the awareness of the above merits of family planning, a few respondents seemed uncertain about some issues regarding family planning.

Respondent 03 noted that:

"Though she knew about family planning, she was not entirely aware of its benefits."

This implies that although there may be a high level of awareness regarding the topic, some women will need additional information and education on the subject for them to gain full knowledge regarding the benefits of modern family planning methods.

The results reveal that respondents regard modern family planning as helpful in ensuring better maternal health, child spacing, economic stability within the household, and improved education of their children. This shows that family planning is understood to be an essential practice that can help improve the standard of living within families residing in Kamuda Sub-County. Nonetheless, there is need for sensitization and health education in order to enhance the awareness of the multiple benefits of modern family planning.

4.3.5 Community Beliefs and Myths about Family Planning

The research also aimed to determine the community's general perception and myths on the usage of modern contraceptives. From the interviews conducted, it was discovered that despite having knowledge about family planning methods, there are myths prevailing in the community that could negatively impact their attitudes towards modern contraceptive methods.

According to some interviewees, the majority of the people in the community think that family planning could make one infertile in the future. According to respondent 08,

"Some people in the community think that if a woman continues to use family planning, especially the injection and implant methods, she will no longer bear any children in the future."

This myth causes fear among women who wish to have children in the future.

"Family planning has been associated with health risks and complications. This is because there is an idea among some ladies that birth control pills lead to heavy blood flow, body weakness, and diseases".

Some women do not consider using family planning methods for contraception due to hearing of experiences from other women claiming that it leads to heavy blood flow and sickness. These views usually deter some women from accessing family planning clinics.

Another issue that was raised in the study was cultural and religious reasons for attitude towards family planning. According to respondent 05,

"In our communities, there are people who see children as a blessing from God".

In such a setting, it would be wrong for any individual to prevent the birth of children. This view usually acts as a hindrance for use of contraceptives by some women.

Furthermore, Respondent 14 revealed that some religious beliefs advocate against the use of artificial family planning techniques. According to her,

"Some religious leaders encourage couples not to use any modern forms of family planning since it goes against God's will."

It means that even if women know about the benefits of using family planning methods, they still would not consider them as they are influenced by their religious beliefs.

Respondent 03 also shared the misconception that misinformation usually gets passed on through *informal channels of communication among friends and neighbors. She stated that*

"Sometimes people only repeat whatever they have heard from other people without considering its credibility."

However, some of the participants indicated that health practitioners are playing a role in correcting these misunderstandings through educating people on the same. As highlighted by Respondent 16, health practitioners from nearby health institutions offer information regarding the efficacy and safety of various family planning techniques, which enable women to make sound judgments.

The participants' answers indicate that while there is knowledge about family planning, certain myths and misconceptions regarding infertility, dangers, and religious beliefs affect the attitudes of some individuals in the community. These results reveal the need for continuous sensitization and education within the community to dispel misconceptions and facilitate the proper use of family planning practices in Kamuda Sub-County.

4.4 Types and Utilization of Modern Family Planning Methods

4.4.1 Current Use of Family Planning Methods

Response	Frequency	Percentage (%)
Using	12	60%
Not Using	8	40%
Total	20	100%

Source Primary Data.

Concerning the usage of modern family planning methods, it was noted that 60% (12 out of 20 respondents) responded positively on whether they were currently practicing any form of family planning. This means that half of the women from Kamuda Sub-County are currently practicing modern forms of birth spacing. The number of women who are currently practicing family planning methods is rather high, which suggests that awareness about family planning is gradually increasing within this community.

It was however discovered that 40% (8 respondents) were not practicing any form of family planning. It implies that there are some women who do not practice modern forms of birth spacing even when the information is accessible to them. This can be due to certain fears related to side effects, cultural and/or religious beliefs, lack of support from partners, or inadequate access to family planning services.

It is clear that even though most of the respondents practiced family planning methods, a certain number of them still did not practice any modern form of birth spacing.

4.4.2 Types of Family Planning Methods Used

Methods	Frequency	Percentage %
Pills	2	10%
Injectable's	5	25%
Implants	3	15%
Condoms	1	5%
IUD	1	5%
Others	0	0%

Source Primary Data

The results on the type of family planning practices adopted indicate that the commonest form of family planning was through injectables at 25% (5 respondents out of 20). This implies that there are many women who like to use injectables because the method is very convenient, providing protection against pregnancy for quite a while without having to be reminded every day. The percentage of respondents practicing implants was at 15%, showing that there are women who prefer to have long-term family planning that is effective without too much work.

Pills accounted for 10% (2 respondents) as family planning methods, implying that these methods involve taking the pills regularly every day to prevent pregnancy. As for condoms and intrauterine devices, both had 5% (1 respondent each) who used the method for family planning. These are forms of family planning that have been found to be less popular compared to others, with 40% not being among the ones using family planning at all.

4.4.3 Factors Influencing Use of Family Planning

This study was meant to explore various factors that could have an effect on women's adoption of modern family planning methods. According to the research results, a variety of interdependent factors could affect women in their decisions regarding the use of family planning. In this regard, such factors as personal motivation, health education, social and economic circumstances have proven to play a significant role.

Firstly, the recommendations and counsel of health workers turned out to be important in determining women's willingness to adopt family planning methods. As it turned out from the responses received, the advice provided by health workers often motivated women to do it.

Thus, respondent 08 shared that

"She began using injectables after she got thorough information about it from the nurse at the local health center. The health worker told her how to use the method properly, its advantages and thus, I decided to do so."

Financial problems were also identified as another factor motivating respondents' selection of contraceptive methods. For instance, respondent 12 indicated that she uses family planning since otherwise, she would not have been able to give birth to so many children because of insufficient finances.

Finally, the need for spacing of the birth of children was often mentioned as one of the major factors motivating the selection of contraceptives. Most of the women surveyed indicated that they practice contraception since spacing is necessary for various reasons. Respondent 05, for example, argued that proper spacing of the birth of children gives room for the recovery of mothers between deliveries and allows parents to give adequate attention to their children. In this case, it can be concluded that reproductive goals of individual women and concern about the well-being of mothers and children strongly motivate the choice of family planning.

Husbands' support was finally cited as an important factor affecting women's decision to use contraception. The respondents mentioned that in most cases, their acceptance and support motivated them to practice contraception, while opposition had the opposite effect. For instance, respondent 14 explained that she started using implantation only after receiving agreement from her husband.

The results show that the utilization of modern contraceptive services in Kamuda Sub-County is dependent on a range of factors such as professional guidance, economic considerations, individual reproductive objectives, and conjugal issues. These variables can be seen to have a positive or negative impact on the use of contraception, implying that any efforts geared towards promoting contraceptive use must take into account information, economic, and social aspects.

4.4.4 Decision Making on Family Planning

Decision Maker	Frequency	Percentage (%)
Woman herself	5	25%
Husband	6	30%
Joint decision	8	40%
Health worker	1	5%

Source Primary Data

The results from the study on decision-making on family planning reveal that decisions are mostly made by the couple, whereby 40% (8 respondents) of the total number (20) of respondents stated that they made family planning decisions together with their husbands. This means that there is an element of consultation between spouses when making decisions on modern family planning in Kamuda Sub-County. The consultations between the spouse could lead to higher compliance since both parents are involved in reproductive discussions.

Decision-making by the husband alone is another common trend in the study area. Thirty percent (6 respondents) indicated that the husband made family planning decisions. In this case, the husband plays a key role in family planning decisions in some communities. The element of patriarchy within such households is evident since the husband makes the family planning decision.

Twenty-five percent (5 respondents) stated that the wife made the family planning decision. This reveals a situation where some women decide on their own on family planning issues without consultations. Five percent (1 respondent) said the health worker was instrumental in making the decision.

4.4.5 Accessibility of Family Planning Services

The research was conducted on the availability of family planning services to women within Kamuda sub-county. The results showed that most of the respondents said that modern family planning services were easily accessible within the surrounding health institutions such as health centers. Several respondents cited the fact that the health workers within these centers offer information, counseling, and diverse methods of contraception, which helps in accessing family planning services by reproductive-age women.

As one of the respondents, 08, said that she often goes to the health center for her family planning injections because

“The health workers are always willing to explain about the different methods and how to use them safely, so that I am able to access my family planning injections.”

As another respondent, 12 said that,

“Condoms and pills are easily available in the community health posts.”

Nonetheless, some of the respondents indicated problems in accessing certain family planning services. According to respondent 05, sometimes health centers are faced with stock-outs of contraceptives, specifically implants and injections. She said,

“Sometimes there is no stock of the product, and I am forced to either wait until there is enough in stock or travel to another health center for service.”

This implies that although the services are geographically accessible, supply problems could impede continuity of services, making family planning initiatives less effective.

Furthermore, some of the respondents considered distance and transport fees critical factors in accessing family planning services. As highlighted by respondent 14, women living far from health centers may have difficulties accessing family planning methods because of the cost of transport and lack of time.

The results show that family planning services are easily accessible within Kamuda Sub-County through the available health centers and that the health personnel play a significant part in disseminating family planning information and methods among women. Nevertheless, there might be supply problems that affect contraceptive distribution and logistics like distance and transport that might affect continuous access.

4.4.6 Side Effects Experienced by Respondents

The research focused on the side effects resulting from the adoption of family planning among women using current family planning techniques within Kamuda Sub-County. From the findings, though the majority of the respondents had realized the importance of family planning, some admitted having experienced physical side effects, which made them unwilling to continue using the particular technique. Some of the side effects mentioned were irregular menstrual period, weight gain, and headache, which were mainly linked to hormonal family planning methods such as pills, injections, and implants.

For instance, respondent 08 said

"After taking injections for several months, she began to have irregular menstrual periods accompanied by heavy flow."

Respondent 11 stated

"Weight gain and feeling weak were side effects experienced by me after taking the pills,"

showing that hormonal imbalances can affect physical well-being and self-confidence. Respondent 14 cited having persistent headaches while on implants, thus deterring her from consistent usage, as she consulted a health worker.

The experiences described above were viewed as frightening by some respondents, especially those women who were not familiar with possible side effects before.

Respondent 05 stated *"The news about side effects from peers and relatives deterred her from practicing family planning for a while"*.

It indicates that individual experiences and social influences may both affect the use of contraceptives.

However, a number of respondents pointed out the importance of guidance offered by a health worker.

Respondent 12

"Said that following consultation with a nurse, she was guided on the use of other approaches, including management of menstrual problems."

This motivated her to keep on practicing a method that suited her health requirements. Overall, the findings show that even though modern approaches to family planning are helpful, side effects play an important role in the lives of some women. Such experiences may discourage women from adopting the practices, and in case they do not receive appropriate advice and guidance on managing the side effects, they may stop practicing such methods.

4.5 Effects of Modern Family Planning on Population Outcomes

4.5.1 Child Spacing

Response	Frequency	Percentage (%)
Yes	14	70%
No	6	30%

Source Primary Data.

According to the findings of child spacing, it was established that more than half of the sampled population (70%) who participated, 14 out of 20, claimed that the use of modern family planning methods helps them achieve appropriate spacing between their children. It shows that the adoption of family planning helps individuals have control over the timing of giving birth and ensures there is an appropriate gap between childbirths. Child spacing is important because it provides mothers enough time to restore their physical fitness and avoid the risk of poor health during future pregnancy periods.

In contrast, 30% (6 sampled) of participants stated that family planning did not play a great role in achieving child spacing within their families. The reason for this situation could include factors such as lack of continuous contraceptive use and even cultural barriers.

From the findings provided above, modern family planning practices have been useful in controlling birth spacing. However, some women still struggle with achieving child spacing through the use of such methods.

4.5.2 Effects on Family Size

The study was conducted to determine the impact of modern methods of family planning on family sizes in Kamuda Sub-county. The results reveal that the majority of the respondents consider family planning to be a vital factor in controlling and determining the size of their families, thus affecting their welfare. Through effective fertility control, couples can reduce their family sizes, enabling them to allocate resources efficiently and provide adequate attention to each offspring.

Respondent 08 indicated that

“Family planning has enabled us to reduce the number of children that we bear to ensure we are able to take care of their basic requirements, such as food, clothing, and education.”

Similarly, Respondent 12 said that

“Before practicing modern contraception methods, her family found it difficult to cater to the needs of many children. However, since they adopted family planning, she and her spouse have been able to prepare for a small family and fulfill the requirements of their children.”

In addition, some of the respondents indicated that a small family size has health benefits because it promotes improved health among mothers. According to Respondent 05,

“Through family planning, one is able to have spaced out pregnancies, which allow the body to recover from childbirth, thus improving maternal and child health.”

Furthermore, another benefit of a smaller family size is the increased economic capacity to meet educational and other developmental requirements. Respondent 14 stated that

“A smaller family makes it easier for parents to save money and invest in their children’s education.”

The conclusion drawn from the findings indicates that the impact of contemporary family planning is quite profound on family sizes through giving the opportunity for couples to make rational decisions regarding their fertility rates. The practice leads to reduced family size through proper planning of births and ensures better conditions regarding health, socioeconomic standing, and general living standards for families within the Kamuda Sub-County.

4.5.3 Effects on Household Income

This study sought to establish the effect of modern family planning on the income and financial planning of families in Kamuda Sub-county. From the study results, it is evident that a majority of

the respondents believe that family planning affects their financial position in a positive way. Many respondents indicated that as a result of regulating the number of offspring, families are able to efficiently allocate the limited household resources to meet the basic requirements of the family such as provision of food, healthcare services, education and even clothing.

Respondent 08 said that

“The family planning method has enabled us to plan how many children we are able to support without any difficulties. We have been able to ensure all the necessary requirements of our offspring are met without straining.”

Respondent 12 further added that

“Having lots of kids made it difficult for us to ensure they had food enough to eat or paid their school fees. It was difficult managing household finances with so many offspring. Family planning has enabled us to regulate the size of our family.”

Other respondents, such as Respondent 05, emphasized that family planning contributes to long-term financial planning. She stated that with fewer children, families can save and invest in income-generating activities, which further strengthens economic stability.

From the results, it can be noted that modern family planning practices positively affect the household income due to decreased costs associated with large families. Since family planning practices help to plan and control the number of children in families, it positively affects the way household resources are allocated, making them use their incomes to educate and take proper care of themselves and their children.

4.5.4 Effects on Child Education

The research looked into how contemporary family planning affects children’s education in Kamuda Sub-County. The results indicate that most of the respondents agree that family planning, which involves regulating the number of children born, positively impacts their education. In other

words, respondents agreed that having a smaller number of children allows parents to afford school costs such as tuition fees, uniforms, textbooks, and other teaching materials. This makes it possible for children to attend schools regularly and achieve excellent academic performance.

For example, Respondent 08 says that

“Due to family planning, we can now pay school fees and buy materials needed for our children. We do not have difficulties meeting the demands of all our children at once.”

This statement proves that modern family planning helps parents budget money efficiently, thus making it easier for them to finance their children’s education.

Respondent 12 shared a similar view by explaining that

“Due to the use of contraception, we now have few children. We concentrate on educating one child at a time. Previously, we had many children of the same age who could not get proper education due to insufficient money.”

Other respondents, such as Respondent 05, emphasized that smaller family sizes reduce the need for children to drop out of school or work to support household income. She explained,

“When we limit the number of children, we can invest more in the education of each child, which will help them have better future opportunities.”

In summary, the research shows that there is an influence of modern family planning on child education. When modern family planning methods help households manage their number of children, they are able to give enough economic and psychological support to their education. As a result, the child’s academic achievement and attendance improve, which enhances his or her future life opportunities.

4.5.5 Effects on Maternal Health

The research assessed the impacts of contemporary family planning practices on maternal health in Kamuda Sub-County. It was found that many of the participants were aware that birth spacing is one of the important advantages of family planning, which helps to improve maternal health significantly. Through the regulation of the timing and interval between pregnancies, women can have enough time to recover from childbirth, avoiding any possible pregnancy-related diseases.

As said by Respondent 08,

“Thanks to family planning, I can space my pregnancy every two years. I feel healthy and my body has enough time to get ready for another baby.”

It indicates that women are aware of the physical advantages of spacing births, such as improved stamina and less fatigue.

In addition, Respondent 12 explained that family planning helps women avoid any complications related to pregnancy, such as anemia, heavy bleeding, and any other pregnancy-related disorders. She mentioned,

“Prior to using any contraception, I used to have babies every few years. I constantly felt weak and sick. However, now I feel healthier, and even my doctor tells me that it is very beneficial for my health.”

Other interviewees, like Respondent 05, focused on the importance of mental health that is ensured by proper spacing of children. She argued that there will be enough time to rest, care for the other children, and avoid stress during and after delivery. She said,

“I will be able to take care of my other child and prepare myself for another pregnancy.”

Additionally, some of the interviewees explained that the health of mothers goes beyond physical recovery after childbirth. For example, Respondent 14 explained that with family planning,

mothers will have enough time to undergo health checkups and prenatal services, which will avoid pregnancy complications.

In conclusion, family planning in the modern era is important in improving maternal health in Kamuda Sub-County. Family planning ensures physical rest and avoids any health problems related to pregnancy. It also promotes physical and psychological well-being among women and their families.

4.5.6 Contribution to Poverty Reduction

This research investigated the contribution of modern family planning to poverty alleviation in Kamuda Sub-County. The results indicated that many people consider family planning as a mechanism that assists in managing resources for improved economic status. Through effective birth spacing and child limitation, families are capable of saving money and use it for critical necessities like food, educational needs, health, and proper accommodation.

According to respondent 08,

"Through family planning, we have been able to plan how many children we can take care of. Currently, we can afford to buy food, pay school fees, and cater to other needs easily compared to the past when things were very difficult."

As observed, family planning provides an opportunity to families to use available finances more effectively without putting pressure on poor living standards.

According to respondent 12,

"When we have few children, I have been able to save some money to start income generating projects for improved livelihoods."

Other respondents, like Respondent 05, were concerned with the role of family planning in alleviating the strain of big families on meager resources in households. This was illustrated when she stated,

“Previously, before we adopted family planning, it would be difficult for us to cater to all our needs with the presence of many children. Now we can plan and ensure each of them has all they require and we live well financially.”

Other benefits of family planning included its role in ensuring sustained economic stability of individuals in the long term. As Respondent 14 explained,

“We are able to educate our kids, give them enough food and thus avoiding any debts that might affect us in future, hence avoiding being poor in the next generation.”

In conclusion, the study findings revealed that family planning plays an important role in reducing poverty in Kamuda Sub-County.

4.5.7 Effects on Women in the Community

In this study, we examined the role of modern family planning services in enhancing women's involvement in community and economic activities in Kamuda Sub-County. It was found that most respondents viewed modern family planning services as a mechanism that gives women power through control over their reproduction, which then enables them to participate in income-generating activities and community projects. With the ability to regulate the number and spacing of births, women will be able to invest their energy in their own growth and involvement in work and social activities.

Respondent 08 said,

"Since I began using family planning, I have had enough time for my small enterprise. I don't have to be pregnant all the time, and I can contribute to our family income."

Family planning has led to greater participation of women in community programs and activities, according to respondent 12. She said,

"With fewer chores at home, I get time to participate in community meetings and women's groups which work for developmental projects. This is because of family planning."

It demonstrates that family planning can bring about positive social consequences, including reproductive rights for women to take an active part in the society.

Furthermore, there are those respondents who feel that family planning helps them gain financial autonomy and empowerment. For instance, respondent 05 explains,

"By being in charge of my family size, I can save money and know what to do with it. It empowers me and makes me confident that I can care for my children and even contribute towards the society."

According to Respondent 14, family planning also facilitates good health for women which further helps them to take part in community activities. "If I have good health and spacing of my children, then I can attend developmental meetings within the community but otherwise it is not possible."

Based on the findings of this study, it has been observed that family planning has an important positive impact on the life of women in Kamuda Sub-County. Family planning has helped women empower themselves in economic, social, and communal ways. Women become able to participate in activities related to generating income and community development because of family planning.

4.5.8 Effects on Population Growth in Kamuda Sub-County

This study looked at how people perceived the impacts of family planning on the population increase of Kamuda Sub-County. The results were that the majority felt that family planning was very important in the control of high population growth through limiting unwanted pregnancies and planning for the number of children and spacing of childbirths. Family planning has an effect on reducing unsustainable population growth rate and its implications on natural resources, socio-economic status, etc.

According to Respondent 08,

“Family planning enables one not to give birth to too many children within a short span of time. This makes sure that families have enough children who can be adequately taken care of and, in turn, the society is not overpopulated.”

For example, Respondent 12 indicated that the prevention of unwanted pregnancies through contraception is a means of slowing down the rate of population increase and the associated burden on the health system, education system, and other social service providers. According to her, *“When couples can plan the size of their family, it helps the population not grow too quickly, and this means that schools, clinics, and local authorities are able to offer better services for all.”*

In contrast, Respondent 05 focused on how family planning contributes to reproductive responsibility. She observed, *“Without family planning, many babies are born into families that are not ready to take care of them. Contraception enables us to conceive at the right time, when we are able, and this prevents population growth.”*

There were also some other respondents who talked about the financial benefits of population growth control. Respondent 14 pointed out that smaller families put less pressure on family and communal resources, which will enable families to take care of their children better by providing proper nutrition, education, and health care to each one. She stated,

“If the population grows at a slower pace, families and communities can handle their resources effectively, and the children will have more opportunities to lead better lives.”

In conclusion, the study findings indicate that modern family planning is seen as a useful method of population growth control in Kamuda Sub-County. With family planning, the number of unwanted pregnancies can be reduced, child-bearing can be planned, and responsible reproductive practices can be promoted, which will benefit families and contribute to the sustainable development of communities.

4.6 Barriers and Challenges to Family Planning Use

4.6.1 Major Challenges

Challenge	Frequency	Percentage (%)
Lack of information	3	15%
Cultural beliefs	4	20%
Religious influence	3	15%
Fear of side effects	6	30%
Husband Opposition	2	10%
Limited access to services	2	10%

Source Primary Data

Some barriers that have been discovered to limit the adoption of modern family planning were found within Kamuda Sub-County. Fear of side effects emerged to be the most common barrier, having been reported by 30% (6 respondents). Irregular menstruation, increased body mass, and headaches were among the reasons why women did not consistently use family planning products. Cultural beliefs emerged as the next most significant barrier to family planning at 20% (4 respondents). The women indicated that some cultures promote larger families because children are regarded as blessings. Information and religion each comprised 15% (3 respondents). The lack of knowledge on the various types of contraceptives and their advantages as well as specific teachings against contraception by certain religious practices hindered family planning adoption. Opposition from husbands and limited access to services were also both cited by 10% (2 respondents) of the participants.

4.6.2 Influence of Religion on Family Planning

The research analyzed the role of religion in determining the acceptance of modern family planning techniques among women in Kamuda Sub-County. The results of the research show that religion

plays a very crucial role in shaping the opinions of people regarding family planning as some religious beliefs prohibit or discourage the use of contraceptives among women, thus making them reluctant to adopt family planning strategies.

The respondent number 05 said,

“Among my religious community, people are told that God rewards those who give birth to more children. In our culture, therefore, family planning is considered going against the wishes of God.”

The respondent number 08 added that his religious beliefs also prohibit the use of contraceptives; thus, he influences her decisions by not allowing the adoption of contraceptive techniques, despite the benefits that could result from adopting these strategies. He stated that

“The knowledge of benefits of family planning cannot stop me from being disobedient to my faith or religious teaching.”

The respondents also added that religion and culture are interrelated, and social pressure from the community influences the attitude towards contraception among women. According to the respondent number 12

In spite of these obstacles, a number of the participants stated that there have been efforts by health personnel and family planning programs aimed at sensitizing the public about the myths associated with the issue, which have helped a section of women to reconcile their beliefs and practice family planning. Respondent 14 said,

"The nurse taught me that spacing my children is not against religion if it helps in protecting the health of myself and the family members. This encouraged me to choose one."

From the above observations, it becomes clear that religion plays a vital role in the decision-making processes related to family planning in Kamuda Sub-County. Whereas religion may act as a barrier to family planning, counseling and educating women by health workers is key in ensuring that they make wise choices that do not contravene their beliefs.

4.6.3 Male Involvement in Family Planning

The paper identified how male participation in family planning in Kamuda Sub-county affects the uptake of family planning practices among women. Men's participation was revealed to have a great impact on whether women use modern family planning methods, as men encourage or discourage their wives depending on their beliefs, perceptions, and knowledge concerning family planning. The willingness of the man either to agree or disagree with family planning plays a major role in determining if the woman feels comfortable using family planning methods.

According to respondent 08,

"Male participation played an important role since my husband encouraged me to use injectable method as he understood that spacing of children enhances our family welfare."

The above quote shows how a supportive husband enables a wife to practice family planning methods.

Alternatively, respondent 12 pointed out that

"Some men discourage use of family planning as they perceive it negatively as having many children means richness and respect in our culture."

In the case of Respondent 05, she mentioned how men's opposition causes women to resort to using contraceptives discreetly or even stop practicing family planning entirely.

Also, some respondents like Respondent 14 said that men's failure to participate in discussions on family planning causes misunderstandings and lack of trust. She explained,

"Some men believe that family planning makes women unfaithful or causes sicknesses. Without participation from men during the education sessions, women find it difficult to justify family planning."

These findings demonstrate that men are an important element when it comes to adoption of family planning in Kamuda Sub-County. Men who support family planning can increase adoption of contraceptive methods, better decision making, and overall improve the health and economic status of families. At the same time, men's opposition can be caused by cultural beliefs, misunderstandings, or lack of knowledge about family planning. Therefore, men are an essential part of the family planning process in order to overcome these challenges.

4.6.4 Suggested Improvements

The investigation aimed at finding out the suggestions by the respondents regarding ways to increase adoption and efficacy of modern family planning techniques in Kamuda Sub-County. The results showed that women knew many ways through which the identified challenges could be addressed and adoption of family planning promoted.

One important recommendation made by the respondents involved sensitization of the community. Respondents believed that ongoing campaigns would assist in eliminating rumors and cultural beliefs related to family planning.

Respondent 08 pointed out,

"If community members are continually enlightened about the advantages of family planning, fewer numbers of people will be afraid of side effects of contraception due to myths or traditional beliefs."

It means that community sensitization and enlightenment were vital aspects in promoting family planning practices. Another essential recommendation made by the respondents related to provision of contraceptives.

According to respondent 12,

"There may be shortages of pills and injectables in some cases. The provision of steady supply will ensure continuity of use among women."

Access to various contraceptives is key to promoting continuous use and preventing unwanted pregnancies.

There were various suggestions from different respondents on the need to involve more males in family planning programs.

The fifth respondent stated that

"Men lack knowledge on the advantages of family planning. Once the men realize its significance, they will get involved in the process of making plans for their wives."

From the above quote, it shows that it is effective for the man to get involved in order to reduce resistance and foster cooperation between the couple regarding family planning.

Improvement in education about health care was another suggestion put forth by various respondents.

The fourteenth respondent said,

"Health practitioners should educate on every kind of family planning, together with the side effects and management. It is important for the women to be enlightened enough to enable them to use the methods efficiently."

The respondents feel that appropriate counseling and guidance from health experts is necessary for eliminating fear and myths about family planning.

It can therefore be concluded that the suggestions made by the respondents show the multi-pronged nature of improving family planning in Kamuda sub-county.

4.9 Summary of Key Findings

This study aimed at exploring the extent to which awareness, adoption, impact, and barriers associated with modern family planning among women of reproductive age in Kamuda Sub-

County, Soroti District, Uganda. According to the results, there was a considerable level of awareness on modern family planning methods, with 85 percent of the respondents knowing at least one modern family planning method. Information was mostly received from health care workers, radio programs, and community discussions.

In terms of adoption, 60 percent of the respondents were practicing at least one form of modern family planning methods, with 25 percent using injectable, 15 percent using implants, 10 percent using oral pills, while 5 percent were using condoms and IUDs each.

Moreover, there were other benefits of family planning identified through the study, which include; proper spacing of children (70%), as family planning helped parents space out the childbirth, hence ensuring improved health of mothers and decreased physical pressure after each birth. Small family sizes helped in efficient management of households, whereby parents could manage resources well to meet basic necessities including feeding, health care, and education of children. Most of the participants mentioned that family planning facilitates improved child education since parents could afford paying school fees, buying necessary materials and sending the children regularly to school. Moreover, family planning helped women engage in income generating activities and community development, thus empowering women economically.

However, there were many challenges hindering effective use of family planning methods, among which were fear of side effects (30%), cultural factors (20%), lack of information (15%) and religion (15%). The remaining 10% of challenges were husbands' opposition to family planning and inadequate services to women.

The respondents indicated that male participation, culture, and religion play a crucial role in determining how contraception is used.

Other changes proposed by the participants to improve the utilization of family planning include more community sensitization campaigns, availability of contraceptives, more male participation, and better health education provided by skilled health professionals.

To summarize, the findings reveal that modern family planning is acknowledged and used in Kamuda Sub-County and that it has had remarkable impacts on the health of mothers, spacing of children, incomes of families, and empowering women. Nevertheless, there are still some major challenges, such as fear of side effects, cultural and religious beliefs, and male non-participation, which have not allowed the full use of family planning techniques.

CHAPTER FIVE

DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

Chapter Five will analyze, interpret, and draw conclusions about the results obtained in Chapter Four. This chapter will try to analyze the knowledge, usage, and impact of modern family planning methods on women in Kamuda Sub-County, Soroti District. Besides, the chapter will identify obstacles faced by women in the adoption of modern family planning, hence offering insights into cultural, religious, and socio-economic constraints in adopting family planning methods.

This chapter intends to critically discuss the results, implications, recommendations for future research, and suggestions from the current results. This chapter will focus on discussing the results in terms of the effect of family planning methods on maternal and children health status, population, and family welfare status. Also, this chapter will offer some suggestions and recommendations based on the results obtained in chapter four for better practices.

5.2 Discussion of Findings

5.2.1 Awareness of Modern Family Planning Methods

As shown in the findings from this study, awareness of modern family planning services among women of reproductive age in Kamuda Sub-County was 85%, indicating a relatively high level of awareness among these women in the region. The level of awareness among women in this study was higher than that of studies done elsewhere in Uganda and sub-Saharan Africa. Awareness of modern family planning services is essential since it provides the basic building block for using such services.

In comparison with studies conducted in other regions in Uganda and in sub-Saharan Africa, awareness of family planning services in Kamuda Sub-County falls within the range of 70% to 90% in studies conducted in rural communities. As seen from the findings in different regions in Uganda and sub-Saharan Africa, the dissemination of information about family planning services has become increasingly widespread. However, a relatively lower percentage of women in this

study were aware of the information regarding family planning services, thus implying that there is a certain number of women who do not know much about these services.

In terms of identifying the information source used, health care workers formed the largest group, representing 40% of those interviewed, followed by radio (20%), friends (15%), and community meeting attendees (10%). Given the predominance of information coming from health care workers, the role of health institutions as providers of relevant and credible information on family planning can be appreciated. Besides, community meetings and the radio play a critical role, especially in rural settings, because of the illiteracy problem. Thus, the importance of using various channels for the dissemination of reproductive health information can be seen.

Regarding education and marital status, the results show that educated females have a high level of awareness as opposed to their counterparts who lack education. This is because educated people have more knowledge about reproduction health, understand the advantages associated with family planning, and can critically analyze the information they get from different channels. Similarly, married women were more knowledgeable than single females because family planning is usually discussed within the house and in the course of antenatal and post-natal checkups. Such an observation is consistent with previous studies that confirm the impact of marital status and education as determinants of family planning awareness.

5.2.2 Utilization and Types of Modern Family Planning Methods

It was also discovered that 60% of women in Kamuda Sub-County had adopted modern contraceptive methods in their reproductive health care services, suggesting moderate usage levels even with high levels of knowledge. The discrepancy between knowledge and adoption shows how different social, economic, and cultural aspects impact contraception adoption. In terms of the type of contraception used, injections constituted 25%, while implants were used by 15% of women because they are more effective, last for longer periods, and are easier to use. Pills, condoms, and intrauterine devices are other types of contraception but are not widely used.

Some of the elements that impacted contraception adoption include professional counseling by health personnel, spacing births, economic concerns, and spousal support. Counseling by health professionals was important because it influenced informed decision-making, while spacing births helped in safeguarding maternal and child health and resource management.

The dynamics of decision-making revealed that 40% of the women decided on matters relating to contraception together with their spouses, 30% of the women were largely influenced by their husbands, while 25% of the women decided on matters related to contraception by themselves. It is evident that men play an increasingly important role in reproductive health matters, but it still shows how much effect gender relations have on household decisions.

5.2.3 Effects of Family Planning on Population Outcomes

It is clear from the findings that contemporary family planning strategies positively contribute towards demographic results within Kamuda Sub-County. Majority of the people (70%) stated that family planning ensures that there is proper spacing of pregnancies in which mothers get enough time to recuperate after giving birth, thus avoiding risks linked to successive births within close proximity.

Additionally, family planning was observed to help in controlling family size, and therefore it allows the household to have control over its financial capacity. It means that by having a small number of members within the family, one can easily cater to all its needs including education. People felt that having fewer children made them capable of meeting educational requirements such as paying school fees and purchasing books.

Family planning also plays a role in improving maternal health by decreasing the burden of multiple pregnancies on women and promoting poverty alleviation through resource management. The women indicated that they had access to more chances for income generation and community development projects, which emphasized the empowerment element of family planning. Moreover, by preventing unwanted pregnancies, family planning ensures that population numbers are managed effectively in the Sub-County, thereby promoting sustainable development.

5.2.4 Barriers and Challenges to Family Planning Use

Although there was relatively high knowledge levels as well as reasonable levels of the use of modern contraceptives, there were various barriers that prevented women from utilizing contraception fully in Kamuda Sub-County. The most prevalent barrier among women was that of the fear of side effects, mentioned by 30% of the interviewees. This was manifested in the form of fears about irregularities in menstrual cycle, increase in body weight, headaches among others, hence making women stop the use of family planning methods. This observation is in agreement with similar studies carried out among rural populations in Uganda, in which the main reason preventing people from using modern methods of contraception was the fear of side effects.

Other barriers included cultural and religious barriers, with some people perceiving family planning as conflicting with traditions and religious doctrines, thus making women reluctant to adopt the methods. Lack of active participation by men was noted to be an obstacle in using modern methods, where some men were against the use of contraceptives hence limiting the autonomy of women on their own reproductive rights. There were instances in which the problem of lack of adequate contraceptive methods was evident.

5.3 Conclusions

This research finds that awareness regarding modern family planning services among the reproductive women in Kamuda Sub-County is fairly high, as almost 85 percent of the subjects surveyed knew about these services. It implies that the health education campaigns have been successful in disseminating information regarding this aspect. Nevertheless, awareness levels are not complete, as some women, especially those who lack education or are unmarried, do not know about modern family planning services.

The use of modern contraceptives was moderately high, with almost 60 percent of the women using them. The injectable method was the most frequently used method, followed by implants. It is due to its efficacy and convenience.

Moreover, the research indicated that family planning plays various roles in the development of population dynamics, such as proper child spacing, control of family size, proper financial management within families, improving children's education, and maternal health. It also promotes the alleviation of poverty levels and women empowerment through encouraging female participation in social and economic activities.

However, some factors limit the full exploitation of the opportunities offered by family planning, such as the concern over the adverse impacts of family planning methods, cultural and religious beliefs, minimal male participation, and at times shortage of contraceptives.

5.4 Recommendations

From the results obtained in this study, the following recommendations are made to improve awareness, accessibility, and utilization of modern family planning among the population of Kamuda Sub-County.

5.4.1 For Policy and Government

For improved effectiveness and acceptance of contemporary family planning services in Kamuda Sub-County, the government and relevant authorities should ensure better accessibility to family planning services. This involves ensuring adequate availability of contraceptives in health care facilities to cater for various contraceptive demands and avoid situations where women cannot afford to access their preferred contraception because there is none available. Increased accessibility will go a long way in accommodating the demand for a variety of contraceptive methods from short-term to long-term methods of contraception.

Another key recommendation is that the government should support community-based awareness campaigns targeting all reproductive-age women. More emphasis should be placed on the poor and illiterate or unmarried women who have not received information about family planning. Various health talks or awareness drives through mass media and other forums would prove beneficial in educating women on family planning benefits.

5.4.2 For Health Facilities

Health facilities also have a crucial part to play in maximizing the effectiveness and efficiency of modern family planning methods. There is need for health practitioners to improve their services through providing comprehensive information regarding the different forms of contraception. It is important to give accurate and relevant information on side effects of these methods and ways of managing them because fear of side effects was one of the barriers. Personalized counseling will enable women to make proper choices and use family planning methods more confidently and sustainably.

It is also advisable for health facilities to encourage men's participation in family planning activities. Male participation is critical because it will enable both partners to be involved in discussions and making decisions regarding reproductive health and family planning, which will result into efficient and consistent use of family planning methods.

5.4.3 For Community and Religious Leaders

Community and religious leaders play a significant part in the attitude towards and practice of family planning in the area of Kamuda sub-county. It is therefore important to involve these leaders so that they may help deal with cultural and religious barriers that have acted as deterrents to using contraceptives. Community and religious leaders can make an important contribution by dispelling misconceptions regarding family planning. Through their active participation in the family planning process, leaders can change negative attitudes into positive ones about family planning.

Through community meetings or workshops spearheaded or supported by the leaders, people will understand the benefits associated with family planning, including improving women's reproductive health and children's health and ensuring stable family life as well as sustainable growth of population. The involvement of community and religious leaders will not only ensure that messages about family planning are culturally appropriate but also convincing for the sake of adoption.

5.4.4 For Further Research

Future studies should consider investigating the longer-term impacts of family planning services offered to residents of Kamuda sub-county in order to gauge socioeconomic outcomes. For instance, researchers might be interested in investigating whether contraceptive use helps raise family incomes, alleviate poverty, and empower women in terms of socioeconomic status, and overall improve the lives of all family members involved. Such investigations will contribute to understanding the broader implications of family planning other than health related ones in order to develop comprehensive policy solutions.

Furthermore, there is an urgent need to study how family planning interventions might promote greater male engagement in matters relating to reproduction and contraception. It is important to learn why males agree or resist getting involved in this issue in order to develop interventions that would encourage joint decision-making and increase contraceptive utilization. Finally, researchers might want to learn more about successful ways of reducing fear of potential adverse effects in order to counteract this obstacle to family planning.

5.5 Chapter Summary

The present chapter has provided a comprehensive discussion, interpretation, and analysis of the findings from the study on modern family planning methods in Kamuda Sub-County. It has been discussed that although awareness about family planning is relatively high, its utilization levels are moderate. The use of family planning is high in the form of injectables and implants in this sub-county. The study revealed that family planning has an influence on spacing between children, regulation of family size, better health of mothers and children, effective management of family income, and empowerment of women. However, there are some barriers, which include fear of side effects, cultural and religious factors, lack of male support, and scarcity of services.

Based on the study findings, certain conclusions and recommendations have been suggested. These are important due to their significant implications for policy formulation, provision of health services, and further research activities.

REFERENCES

- ABAASI, M., (2008). “Factors contributing to Low Utilization of Community Based Family Planning Services Among Women of Child Bearing Age in Midigo Sub County, Yumbe District”. Kampala, Uganda.
- MPED, (2008). National population policy for transformation and sustainable development. MoH. Health Sector Strategic Plan II, (2005/06-2009/10)
- Johns Hopkins Bloomberg School of Public Health, (2007). Implants: the next generation. Population Reports Series K, no. 11. Baltimore.
- World Health Organization, (2007). Family planning: A global handbook for providers. Geneva.
- Population Reference Bureau, (2006). 2005 World Population Data Sheet. Washington, DC.
- UNFPA (2017). Reproductive Health Research. Barriers to use of family planning services in Malawi: Findings from Focus Group Discussions. University of Southampton
- UNICEF, MOH, (2017). Statistics. Maternal mortality ratio (2005-2007). Kampala, Uganda.
- WHO, (2014). World Health Organization, Family Planning services. New York, USA.
- WHO, (2017). Family Planning. A global hand Book for Providers. World Health Organization and Johns Hopkins Bloomberg School of Public Health/Centre for Communication Programmes.
- OYEDOKUN A., (2007). Determinants of Contraceptive Usage: Lessons from Women in Osun State, Nigeria. Volume 1, Issue 2, 2007, ISSN 1934-7227, Osun, Nigeria
- NAKIBONEKA, C., 2006. Factors affecting the uptake of Natural Family Planning Methods in Catholic Health Units in Masaka Diocese. A dissertation for Master of Science degree in Health Service Management, Uganda Martyrs University Nkozi.
- MONA, (2012). Spousal Communication and Family Planning Adoption: Effects of a Radio Drama Serial in Nepal. International Family Planning Perspectives Volume 28, Number,

March 2012. Department of Population and Family Health Sciences, Johns Hopkins University Bloomberg School of Public Health, Baltimore, MD, USA.

KATENDE, C., (2013). Facility-Level Reproductive Health Interventions and Contraceptive Use in Uganda. *International Family Planning Perspectives*

- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101.

- Stevens, G. (2024). Braun and Clarke’s Approach to Thematic Analysis. *Academic Writing and Research*.

MAO, (2007). Knowledge, Attitude and Practice of Family Planning: A Study of Tezu Village, Manipur (India). *The Internet Journal of Biological Anthropology*. 2007 Volume 1 Number 1

MAHMAHMOOD, N., (2013). Five factors affecting family planning use in Pakistan: an Analysis of husbands and wives. Presentation at the International Population Conference, Union for the Scientific Study of Population.

APPENDICES

Appendix 1

RESEARCH INSTRUMENT 1

RESEARCH QUESTIONNAIRE

My name is Lumumba Olga Joy and I am a Social Work and Administration student at Uganda Christian University. My study focuses on: "The Impact of Modern Family Planning Techniques on the Present-day Population." The study shall be conducted by carrying out a case study of Kamunda Sub County in Soroti district.

All information provided to me will be treated with strict confidentiality and will only be used for the purpose of this study. It is entirely up to you whether to participate in the study or not.

I would be grateful if you could share your valuable insights and experience on the topic under consideration.

Section A: Demographic Information:

1: DEMOGRAPHIC QUESTIONNAIRE

(To collect background information before the interview begins)

Section A: Background Information

1. Age: _____
2. Marital status:
 - ☐ Single
 - ☐ Married
 - ☐ Divorced
 - ☐ Widowed
3. Level of education:
 - ☐ No formal education

☐ Primary

☐ Secondary

☐ Tertiary

4. Occupation: _____

5. Number of children: _____

6. Age at first birth: _____

7. Religion: _____

8. Village name: _____

RESEARCH INSTRUMENT 2: SEMI-STRUCTURED INTERVIEW GUIDE

(For women aged 15–49 years in Aminit Parish, Kamuda Sub-County)

SECTION B: Awareness of Modern Family Planning Methods

1. Have you heard about modern family planning methods?
 - If yes, which methods do you know?
2. Where did you first hear about family planning?
 - Health worker
 - Radio
 - Friends
 - Husband/partner
 - Community meeting
 - Other (specify)
3. What do you understand by modern family planning?
4. In your opinion, what are the benefits of using family planning?
5. Are there any beliefs or myths in your community about family planning?

SECTION C: Types and Utilization of Modern Family Planning Methods

1. Are you currently using any modern family planning method?

- If yes, which method?
 - If no, why not?
2. What influenced your decision to use or not use family planning?
 3. Who usually makes decisions about family planning in your household?
 4. How accessible are family planning services in your area?
 5. Have you ever experienced any side effects? If yes, explain.

SECTION D: Effects of Modern Family Planning on Population Outcomes

1. Has family planning helped you in spacing your children? How?
2. In your view, how does family planning affect:
 - Family size?
 - Household income?
 - Child education?
 - Maternal health?
3. Do you think family planning reduces poverty in families? Explain.
4. How has family planning affected women in this community generally?
5. Do you think family planning can help control population growth in Kamuda Sub-County?
Why or why not?

SECTION E: Barriers and Challenges

1. What challenges prevent women from using family planning in this area?
2. Does religion influence family planning use here? How?
3. Do men support or oppose family planning? Explain.
4. What improvements would you suggest to increase family planning use in this community?

KEY INFORMANT INTERVIEW GUIDE (Optional but Recommended)

(For health workers, community leaders, or local government officials)

1. What are the most commonly used family planning methods in this area?

2. What challenges do women face in accessing family planning services?
3. How has family planning influenced fertility trends in Kamuda Sub-County?
4. What policies or programs support family planning here?
5. What improvements are needed?

OBSERVATION CHECKLIST (Optional)

The researcher may observe:

- ☐ Availability of contraceptives at health facility
- ☐ Presence of family planning posters
- ☐ Privacy of consultation rooms
- ☐ Client flow at health center

CONSENT FORM (Very Important for Ethics)

Informed Consent Statement

I am conducting a study on the effects of modern family planning methods on the current population in Kamuda Sub-County. Your participation is voluntary. The information you provide will be confidential and used strictly for academic purposes. You are free to withdraw at any time.

Do you agree to participate?

- ☐ Yes
- ☐ No

Signature/Thumbprint: _____

Date: _____

Appendix 2: Research Letters



**UGANDA CHRISTIAN
UNIVERSITY**

A Centre of Excellence in the Heart of Africa

9th March, 2026

TO WHOM IT MAY CONCERN

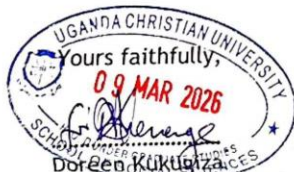
Dear Sir/Madam

Re: INTRODUCTORY LETTER FOR RESEARCH

This is to introduce to you **LUMUMBA Olga Joy** Registration number **M23B15/017**, a student of Uganda Christian University, pursuing Bachelor's degree in Social Work and Administration. She is expected to carry out research in the final year under the guidance of a university supervisor in partial fulfillment for the requirements of the above-mentioned award.

Topic: "The effects of Modern family planning methods on the population. A Case study of Kamuda Sub-county, Soroti District"

The purpose of this communication is to request your office to allow her collect data from your organization. Any assistance rendered to her will be highly appreciated.



Doreen Kukugiza
Coordinator, Research & Fieldwork Programmes
Tel: 0773395349
Email: dkukugiza@ucu.ac.ug

A Centre of Excellence in the Heart of Africa

P.O. Box 4, Mukono, Uganda (East Africa), Plot 67-173, Bishop Tucker Road, Mukono Hill, Tel: +256 (0) 31 235 0800, www.ucu.ac.ug
Ugandachristianuniversity @UCUniversity, Founded by the Province of Church of Uganda, Chartered by the Government of Uganda.

CR/2201
c/o Uganda Christian University
Mukono

10/3/2026

The Chief Administrative Officer
Soroti District Local Government
P.O Box 61
Soroti



Dear sir/Madam,

**RE: REQUEST TO CARRY OUT RESEARCH AT KAMUDA SUB COUNTY AMINIT
PARISH IN SOROTI DISTRICT.**

Warm greetings, the above matter refers.

I **Lumumba Olga Joy** a student at Uganda Christian University Mukono pursuing a Bachelor's Degree in Social Work and Administration with Registration Number: M23b15/017 kindly requests to carry out my research at the above address.
Attached is the introductory letter from school.

I will be grateful if my request meets your consideration.

Thank you,

Yours faithfully

Lumumba Olga Joy
Student

OFFICE OF THE LCI
DBAK VILLAGE
AMINIT PARISH
KAMUDA SUB-COUNTY
SOROTI DISTRICT
10/03/2026

THE SUB-COUNTY CHIEF
KAMUDA SUB-COUNTY
SOROTI.

THU:-
THE LCI DBAK VILLAGE

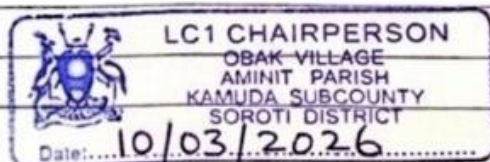
Dear Sir/Madam,

RE:- INTRODUCTION OF OLGA JOY HUMUMBA.

The above named person is a student at Uganda Christian University Mukono pursuing a Bachelors Degree in Social Works and Administration. She has requested to carry out research work at our Sub-County Kamuda but in Amini Parish. Please assist her accordingly as per her request.

Thanks yours in anticipation,
AHADA SIMON

A.S.D.
LCI DBAK Chairperson DBAK Village.



Appendix 3. Research Photos



