

A STUDY ON FACTORS THAT HINDER EFFECTIVE UTILIZATION OF
CONTRACEPTIVES AMONG WOMEN ATTENDING THIKA LEVEL 5 HOSPITAL

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Abstract

Family planning can be simply defined as controlling the number of children in a family and the interval between their births particularly by means of artificial contraception. It can also be defined as the means by which the basic human group (family) is organized in accordance with its social, economic and psychological resources in order to achieve optimum health for all its family members. It therefore signifies having as many children as wanted and as can be afforded so as to guarantee the family's self-sufficiency when children are born. Family planning services include counseling and education, preconception care, screening and laboratory tests and all FDA approved methods of contraception. This concept has been in existence worldwide throughout ages in widely differing cultures and societies.

The purpose of this study was to assess factors leading to under utilization and inaccessibility of modern contraceptives among women attending Thika Level 5 District Hospital in Kiambu county. The research will also to establish and determine the most preferred and readily available forms of contraceptives in the study area.

The availability and accessibility of the family planning program also affects the outcome implementation of family planning services. This research intended to determine how each of the mentioned factors affected the program implementation and other unknown factors hindering the program implementation if any.

The research therefore will focused on the perception, fears and concerns of the potential users about health associated risks of contraceptive methods. The study was a cross sectional study where random sampling was done in which participants were given questionnaires fill or in case of any illiterate participants, the researcher will helped them to fill in the questionnaires as they arrived at the clinic until a total sample around 100 was obtained. Questionnaires were prepared in English and verbally translated into the local language where it necessitated during data collection time. The questions used during the study were pre-tested before the actual data collection day. Any necessary changes were made on wording and question format following the pre-test. I used two research assistants who were given the necessary training and pre-testing before going to collect data. Data was collected for 5 days. Logistical requirements for the field work were always in place for the following day which included the questionnaire. All the completed questionnaires were collected and checked for accuracy and completeness before the team members left the field. The data collected was analyzed manually using Microsoft excel and scientific calculators and was presented in form of tables, pie charts and simple statements.