

PEER AND COMMUNITY INFLUENCES ON ATTITUDE OF MALES TOWARD FAMILY PLANNING IN NIGERIA

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Abstract

Family planning programs require male involvement to succeed. However, men's attitudes towards family planning remain a significant obstacle in Nigeria. This paper examines the peer and community influence on male attitudes towards family planning in Nigeria. Theory of Planned Behavior (TPB) was adopted as the theoretical framework. This paper also explores the existing body of research on peer and community influence on male attitude towards family planning in Nigeria. The argument presented is grounded in a comprehensive review of relevant articles and publications. Majority of the literature reviewed, highlight the importance of peer and community influence in shaping men's perceptions and behaviors related to family planning, and identifies key factors that impact male engagement in family planning services. These socio-cultural factors are, religious belief and patriarchal system, myths and misconceptions, levels of educational attainment, economic consideration and spousal communication, The findings underscore the need for Policy makers to leverage the role of respected leaders in community advocacy by engaging the men in family planning, campaign targeted interventions that engage men and their communities to foster positive attitudes towards family planning.

Keywords: Male Attitudes, Family Planning, Peer Influence, Community Influence, Nigeria.

Introduction

Peer influence refers to the impact that individuals within a social group have on one another's attitudes and behaviors. In the context of family planning, peer influence can significantly shape men's perceptions and decisions regarding contraceptive use. Studies have shown that men often look to their peers for validation and support in their choices, including family planning (Adewale et al., 2021). When peers endorse or normalize family planning practices, it can lead to more positive attitudes and increased utilization of contraceptive methods among men. Conversely, negative peer perceptions can create barriers to engagement with family planning services (Ogunjuyigbe et al., 2022).

Community influence encompasses the collective attitudes, norms, and values prevalent within a specific community that affect individual behavior. In Nigeria, community beliefs about family size, masculinity, and reproductive health significantly shape men's attitudes toward family planning (Bello et al., 2023). Community leaders, religious institutions, and cultural practices play crucial roles in either promoting or stigmatizing family planning use. Positive community endorsement of family planning can facilitate access to services and encourage more men to participate in family planning initiatives (Adedinet et al., 2023).

Male attitudes towards family planning refer to the beliefs, perceptions, and feelings that men hold regarding contraception and family size regulation. These attitudes are influenced by

personal experiences, cultural background, peer interactions, and community norms. Research indicates that many men in Nigeria harbor misconceptions about contraceptives, often viewing them as a threat to masculinity or as contrary to cultural values (Kumar et al., 2023). Shifting these attitudes is essential for improving men's participation in family planning and achieving better reproductive health outcomes.

Family planning is a way of thinking and living adopted voluntarily based on knowledge, attitude, and responsible decisions by individuals and couples to promote the health and welfare of the family and thus contribute effectively to the socioeconomic development of the country (Oyefabi et al., 2022). Family planning programs began gaining international attention in the 1950s and 1960s, with a focus on controlling population growth and improving maternal and child health (Cleland et al., 2006). Initially, these programs targeted women as primary users of contraceptives, largely excluding men from the dialogue. The emphasis on women-centric approaches continued throughout the 20th century, despite evidence that male involvement could significantly enhance program outcomes. The need for male involvement became more prominent after the 1994 International Conference on Population and Development (ICPD) in Cairo, which emphasized reproductive health as a shared responsibility of both genders. Although this marked a shift in global policy, many countries, especially in sub-Saharan Africa, continued to face cultural and social barriers that limited male participation in family planning (Dudgeon et al., 2004). The conference highlighted the role of gender norms and peer influence in shaping men's attitudes towards family planning.

In sub-Saharan Africa, cultural norms around masculinity and fertility often encourage large family sizes, impacting male attitudes toward contraceptive use. Research indicates that social expectations around masculinity discourage men from openly supporting family planning, often due to peer pressure and community norms (Kabagenyi et al., 2014). The concept of reproductive health is frequently viewed as a "women's issue," and men may feel ostracized or emasculated for engaging in discussions about contraception (Bawah et al., 1999). Peer influence is a major factor, as men who belong to social circles that endorse traditional beliefs may be discouraged from supporting family planning (Kabagenyi et al., 2021).

In Nigeria, family planning efforts date back to the 1980s, primarily driven by the need to address high fertility rates and improve maternal health. Early programs focused on women, with minimal attempts to involve men (Okechukwu et al., 2016). Cultural beliefs favoring large families and associating male virility with fathering many children have historically impeded male participation in family planning discussions. Peer influence is a major factor, as men who belong to social circles that endorse traditional beliefs may be discouraged from supporting family planning (Kabagenyi et al., 2021). Okwuosa et al. (2020) found that peer networks often reinforce traditional beliefs that discourage male involvement in family planning. Men may avoid discussing or supporting contraception due to fear of social ostracism or being perceived as weak. This dynamic is especially pronounced in communities where high fertility is still regarded as a symbol of wealth and status (Adedini et al., 2023). Peer influence is a major factor, as men who belong to social circles that endorse traditional beliefs may be discouraged from supporting family planning (Kabagenyi et al., 2021).

Some studies indicate that peer and community norms are crucial in shaping male attitudes toward family planning in Nigeria. For instance, a study by Okwuosa et al. (2020) found that peer networks and community leaders can either promote or discourage contraceptive use, depending on prevailing local beliefs. Men are more likely to adopt family planning practices if they perceive that their peers are supportive or if community leaders endorse contraceptive use (Adebowale et al., 2014). Conversely, negative peer pressure can discourage men from using contraceptives or even discussing family planning with their partners. Community leaders, including religious and traditional figures, further shape male attitudes by either endorsing or rejecting family planning. Ezeanolue et al. (2021) highlighted that when influential figures support contraceptive use, it can help change prevailing attitudes and reduce the stigma associated with male participation. Conversely, negative messaging from these leaders can perpetuate myths and misinformation about contraceptives, thereby reinforcing resistance among men.

Previous research highlights the impact of targeted interventions that leverage peer and community dynamics to improve male involvement in family planning. For example, programs that incorporate peer education and involve respected community figures have shown success in changing perceptions and increasing male participation (Bello et al., 2021). Studies have also demonstrated that men's attitudes can shift positively when exposed to male role models who advocate for shared responsibility in reproductive health (Ezeanolue et al., 2015). These approaches have been instrumental in breaking down the traditional barriers and encouraging more open discussions about contraception.

While there has been progress in addressing male involvement in family planning in Nigeria, challenges persist due to deep-seated cultural and religious beliefs. However, despite the determined efforts towards involving men in FP use, much remains to be done since peer and community influence continues to play a significant role in perpetuating myths and misconceptions about contraception in Nigeria. There are a limited number of studies which have attempted to investigate the peer and community influence on male attitude towards family planning in Nigeria. Therefore, to fill this research gap, this study focuses on Peer and Community influence on male attitude towards family planning in Nigeria

Review of Literature/ Conceptualization of Key terms

Family Planning (FP)

Family planning is the voluntary control of reproduction through various medical, behavioral, or natural methods, enabling individuals and couples to determine the timing, number, and spacing of their children. This practice is critical for improving overall health, economic outcomes, and family well-being. Family planning allows for better-prepared pregnancies, reduces risks associated with maternal and child health, and helps in achieving sustainable population growth (World Health Organization [WHO], 2021). Studies show that access to family planning services can decrease maternal mortality by reducing the number of unintended pregnancies and high-risk births, which are common factors contributing to maternal health complications (Guttmacher Institute, 2022).

Family planning methods are diverse, including contraceptive pills, intrauterine devices (IUDs), implants, condoms, sterilization procedures, and fertility-awareness-based methods.

These options enable individuals and couples to choose a method that best fits their health needs, personal preferences, and cultural considerations (Kumar et al., 2023). For example, hormonal methods are widely used and provide a reliable means of contraception, while non-hormonal options like condoms also offer protection against sexually transmitted infections (STIs). Increasing access to such a range of family planning options has led to better reproductive autonomy and improved life planning for millions of women globally, allowing for increased participation in education and the workforce (United Nations Population Fund [UNFPA], 2022).

In addition to personal and family health benefits, family planning has significant socioeconomic impacts. By reducing unintended pregnancies, family planning enables individuals, particularly women, to pursue educational and economic opportunities, thus contributing to national economic growth (UNFPA, 2022). Research highlights that women with access to family planning services are more likely to have financial stability and invest in the health and education of their children, creating a positive intergenerational impact (Bello et al., 2023).

Family Planning Methods

Family planning methods offer a range of options that enable individuals and couples to control the timing and number of their children, thereby supporting healthier families and communities. These methods can be broadly classified into hormonal, barrier, long-acting reversible, permanent, and natural methods. Each category provides unique benefits, and the choice of method is often influenced by factors such as health needs, convenience, and cultural acceptance (Kumar et al., 2023).

a. Hormonal Methods

Hormonal contraceptives, such as birth control pills, patches, injections, and implants, work by regulating or inhibiting ovulation. These methods are popular due to their high effectiveness when used consistently and correctly (Cleland et al., 2022). However, they may have side effects, which can vary from mild (nausea, headaches) to more significant concerns for some users, such as increased risk of blood clots. The use of hormonal contraceptives has expanded as health practitioners provide more personalized guidance to help users choose methods best suited to their needs (WHO, 2021).

b. Barrier Methods

Barrier methods, including male and female condoms, diaphragms, and cervical caps, physically block sperm from reaching the egg. Male condoms, in particular, are widely used as they also protect against sexually transmitted infections (STIs), making them a dual-purpose option (GuttacherInstitute, 2022). Barrier methods are relatively affordable and accessible, although they generally have lower effectiveness rates compared to hormonal or long-acting methods if not used consistently.

c. Long-Acting Reversible Contraceptives (LARCs)

LARCs, which include intrauterine devices (IUDs) and contraceptive implants, are highly effective and provide extended protection for three to ten years, depending on the type. These methods have gained popularity for their low maintenance and long duration, especially among those who wish to delay childbearing for a prolonged period (Ogunjuyigbe et al., 2022). LARCs have been associated with lower unintended pregnancy rates, especially in settings where consistent access to healthcare is limited (Bello et al., 2023).

d. Permanent Methods

Permanent methods, such as tubal ligation for women and vasectomy for men, provide a lifelong solution for couples who are certain they do not want more children. These methods are highly effective, and recent studies highlight their role in meeting the needs of couples in stable relationships or those who have reached their desired family size (UNFPA, 2022). However, cultural beliefs and lack of awareness can act as barriers to their adoption in some regions.

e. Natural Methods

Natural family planning, or fertility awareness-based methods, rely on tracking the menstrual cycle to predict fertile windows. This approach requires users to monitor physiological signs, such as body temperature and cervical mucus, to determine when they are most likely to conceive (Adedini et al., 2023). While these methods are hormone-free and have no side effects, they require thorough education and commitment, which can affect their effectiveness.

f. Emergency Contraception

Emergency contraception, available in pill form or as an IUD, can prevent pregnancy after unprotected intercourse or contraceptive failure. The emergency contraceptive pill is most effective when taken within 72 hours of unprotected sex, and it has become an essential part of family planning, especially for preventing unintended pregnancies (Kumar et al., 2023). However, its use is sometimes hindered by stigma and misconceptions, which underscores the need for accurate information and awareness.

Theoretical Framework

Theory of Planned Behavior (TPB)

In 1991, Ajzen created the Theory of Planned Behavior (TPB). The theory aims to explain every behavior that individuals possess the capacity to regulate. The Theory of Planned Behavior provides a useful framework for understanding male attitudes toward family planning in Nigeria by examining how attitudes, subjective norms, and perceived behavioral control influence men's intentions and actions regarding contraceptive use. TPB suggests that individuals' intentions are shaped by these three primary factors, which together help predict behavior (Ajzen, 1991). Within TPB, attitudes refer to an individual's positive or negative evaluations of a behavior. For Nigerian men, these attitudes are influenced by perceived benefits, such as economic stability and family welfare, as well as perceived drawbacks, including potential health risks and social stigma. Studies have shown that men who recognize the economic and health benefits of family planning often have more favorable attitudes. A study by Adedini et al. (2023) found that men who believed family planning would help them provide better for their families had stronger positive attitudes towards its use. Conversely, men with misconceptions about contraceptive side effects or cultural biases against contraception often hold negative attitudes, inhibiting their willingness to use family planning.

Subjective norms refer to the perceived social pressures that individuals feel from significant others, including family, friends, and community members, regarding a behavior. In Nigeria, where communal and family expectations strongly influence behavior, subjective norms play a critical role in shaping male attitudes toward family planning. Research by Bello et al. (2023) found that men are more likely to adopt positive attitudes toward family planning when influential community figures, such as religious leaders and elders, support it. When men perceive that their peers or community leaders endorse family planning, they are more likely

to feel social approval for adopting contraception. However, when community norms discourage contraceptive use, men may feel discouraged from pursuing it, fearing criticism or exclusion from social groups. Perceived behavioral control refers to the individual's assessment of their ability to perform a behavior, influenced by available resources, knowledge, and self-efficacy. Men's attitudes toward family planning are partly shaped by their perceived ability to access and use contraception effectively. In areas where access to family planning services is limited, men often feel a lack of control, which negatively affects their attitudes. Ogunjuyigbe et al. (2022) found that men who perceived a lack of resources or knowledge about family planning were less likely to have positive attitudes, as they doubted their ability to access or understand contraceptive options. Conversely, men who had access to healthcare facilities offering reliable family planning services, and those who were educated about the use and benefits of contraception, reported higher perceived control and more positive attitudes.

According to TPB, positive attitudes, supportive subjective norms, and strong perceived control collectively increase the likelihood of a favorable intention toward family planning. This intention, in turn, is a strong predictor of actual behavior. A study by Kumar et al. (2023) highlighted that Nigerian men with positive intentions toward family planning driven by supportive attitudes and community norms were more likely to take proactive steps, such as discussing family planning with their partners and accessing contraceptive services. However, men who lack positive social support or feel they lack control over accessing family planning services are less likely to act on any intentions to use contraception. Despite the influence of TPB elements on male attitudes toward family planning, various barriers can interfere with intentions, including economic, cultural, and educational factors. Men who face economic hardship or lack education on family planning may hold intentions aligned with positive attitudes but ultimately fail to take action due to these barriers. The United Nations Population Fund (UNFPA, 2022) has reported that economic and educational interventions, alongside policy shifts, could help align men's attitudes and behaviors more closely, improving access to family planning resources and increasing men's likelihood of using contraception.

Male Attitudes toward Family Planning in Nigeria

Male attitudes toward family planning in Nigeria are shaped by a complex interplay of cultural, social, and economic factors that significantly impact their willingness to engage in or support family planning practices. Traditionally, Nigerian society places a high value on fertility, often viewing larger family sizes as a status symbol or indication of wealth and masculinity. This cultural preference can create resistance among men toward adopting or supporting family planning measures, as they may associate contraception with a reduction in virility or a challenge to traditional gender roles (Adedini et al., 2023).

Research indicates that misconceptions about contraceptive methods and their potential side effects also influence male attitudes. Some men believe that family planning methods may lead to long-term health issues or reduced sexual satisfaction for their partners, which contributes to their reluctance (Bello et al., 2023). Additionally, many men in Nigeria view family planning as primarily a woman's responsibility, often leading to limited male involvement in contraceptive discussions or decisions (UNFPA, 2022). This perception can be reinforced by peer influence, where men's social circles may discourage engagement with family planning to align with cultural expectations (Adewale et al., 2021).

Role of Peer Influence and Social Networks in Shaping Males Attitudes toward Family Planning

Peer influence and social networks significantly shape attitudes toward family planning, particularly in communities where social norms and interpersonal relationships guide behaviors. Through peer interactions, individuals gain insights, share experiences, and often reinforce or challenge community perceptions regarding family planning, which can either support or deter contraceptive use. The roles of peer influence/networks in shaping males attitudes towards family planning is buttressed below:

Reinforcing Social Norms and Cultural Beliefs Peer influence often serves as a vehicle for reinforcing existing cultural beliefs and social norms around family planning. In communities where large families are valued, for instance, peer influence may discourage contraceptive use due to perceived social or familial expectations (Adewale et al., 2021). Studies have found that men are less likely to support family planning if they perceive their peers or social networks as holding negative attitudes toward it, as aligning with community norms often takes precedence over adopting individual family planning goals (Ogunjuyigbe et al., 2022).

Knowledge Sharing and Dispelling Misconceptions In settings where access to formal family planning education is limited, peer networks can serve as a primary source of information, often helping to correct misconceptions about contraceptives. According to Bello et al. (2023), positive peer influence through informal discussions can dispel common myths such as fears around infertility or health risks by providing accurate information and real-life examples. These discussions can make men more receptive to family planning, especially when respected peers or community members share positive family planning experiences.

Promoting Positive Attitudes and Acceptance Positive peer influence can contribute significantly to changing attitudes toward family planning, especially when individuals see peers benefitting from smaller family sizes and improved financial stability. UNFPA (2022) reported that men with peers who support family planning are more likely to adopt supportive attitudes themselves, as they observe the advantages of family planning in their peers' lives. Such peer-to-peer encouragement can make family planning discussions more acceptable within social groups, ultimately normalizing contraceptive use

Reducing the Stigma of Family Planning In some communities, family planning is stigmatized, particularly when men believe it might undermine their masculinity or interfere with cultural norms. Peer networks can help reduce this stigma when men see friends or respected peers openly discussing and participating in family planning. A study by Adedini et al. (2023) highlights that peer-led discussions have successfully changed negative attitudes by reframing family planning as a responsible and beneficial choice, rather than a deviation from traditional values.

Social Pressure and Conformity Peer influence is not always positive, as individuals may feel pressured to conform to group norms that oppose family planning. In regions where traditional values dominate, social pressure from peers can reinforce resistance to contraceptive use. Kumar et al. (2023) observed that men often avoid family planning practices if their peers hold negative views, as maintaining group cohesion can sometimes outweigh personal beliefs or

family planning benefits. This pressure can create a challenging environment for individuals interested in family planning, underscoring the importance of supportive peer networks.

Encouragement and Emotional Support: Peer networks provide emotional support, encouraging men to engage in family planning conversations with their partners. In many cases, men are more willing to consider family planning when they feel validated by peers who have had similar experiences and found value in using contraception (Cleland et al., 2022). Such support can reduce feelings of isolation or fear, enabling individuals to make informed choices based on shared experiences.

Role Modeling Through Peer-Led Interventions: Peer-led interventions, where community leaders or respected individuals advocate for family planning, have been shown to significantly improve attitudes. As highlighted by UNFPA (2022), peer educators who share similar backgrounds and experiences with their target audiences help to build trust and credibility. By witnessing peers discuss family planning openly, individuals may feel more comfortable exploring their own options, making peer-led initiatives a powerful tool for promoting positive attitudes and increasing contraceptive adoption.

Roles of community influence on male attitudes towards family planning in Nigeria

Community influence is a critical factor shaping male attitudes toward family planning in Nigeria, where traditional beliefs, social expectations, and local leadership structures hold significant sway over individual behaviors and choices. This influence can be both supportive and restrictive, depending on community norms, access to family planning education, and the stance of community leaders. The community's roles towards male attitudes in family planning is highlighted below:

Traditional and Cultural beliefs: In many Nigerian communities, traditional values place a high emphasis on large families, viewing them as a source of strength, wealth, and social status. These cultural beliefs often discourage family planning, as men may feel pressure to conform to expectations of having many children. According to Adewale et al. (2021), men who live in communities with strong pro-natal values are more likely to view family planning negatively, as it conflicts with the community's concept of masculinity and success. This resistance is further compounded by cultural norms that designate family planning as a woman's responsibility, leaving men less likely to engage actively in these decisions.

Influence of Religious and Community Leaders: Community leaders, including religious figures, play a powerful role in shaping attitudes and beliefs around family planning. In communities where these leaders openly support family planning, men are more likely to adopt positive attitudes. Adedini et al. (2023) found that in regions where religious leaders advocate for responsible family planning, male participation increases due to the leaders' influence in framing family planning as compatible with religious and cultural values. Conversely, in communities where leaders oppose contraceptive use, men may avoid family planning to align with these influential figures.

Role of Community-Based Health Interventions: Community-based health interventions that target both men and women have shown promise in reshaping attitudes toward family planning by involving men directly in education and outreach efforts. These interventions often utilize

respected community members as health advocates, making it easier for men to engage without fear of stigmatization. Bello et al. (2023) noted that in communities with family planning programs tailored for men, attitudes improved as men became more informed about the economic and health benefits of smaller families. By focusing on local needs and engaging influential community figures, such initiatives help counter misinformation and promote positive discussions around family planning.

Collective Knowledge Sharing and Information Dissemination: Knowledge about family planning is often disseminated through social networks and community gatherings, where individuals share personal experiences and opinions. In settings where family planning information is limited, communities rely on this informal knowledge-sharing network. As a result, communities with higher levels of misinformation tend to exhibit greater resistance to contraceptive methods, as myths are perpetuated within these circles (UNFPA, 2022). Kumar et al. (2023) suggest that community-based education programs targeting these informal networks can have a profound effect by empowering trusted individuals to share accurate information and correct misconceptions about family planning.

Economic Influences and Community Perceptions: Economic factors within the community also impact attitudes toward family planning. In economically strained communities, large families may be seen as a burden, leading to greater acceptance of contraceptive use as a means of economic stability. However, in wealthier communities or regions where traditional wealth is associated with large family size, there may be more resistance to family planning. The United Nations Population Fund (2022) points out that economic considerations shape family planning acceptance differently across regions, with communities in financially constrained areas showing more receptiveness to family planning education and resources.

Public Health Campaigns and Community Outreach: Government and NGO-led public health campaigns that work within communities can play an influential role in shifting attitudes by addressing specific cultural concerns and emphasizing the benefits of family planning for health and economic well-being. Programs that involve community leaders and target specific cultural norms have been particularly effective in changing male perceptions. Cleland et al. (2022) observed that community outreach programs which framed family planning as an investment in the family's future were more successful in encouraging male participation, especially when campaigns respected and incorporated local values.

Socio-Cultural Factors Influencing Male Attitude towards Family Planning

Male attitudes toward family planning in Nigeria are influenced by various sociocultural factors, including traditional gender roles, cultural beliefs about family size, religious perspectives, economic considerations, and peer and community influence. These factors play a significant role in shaping perceptions and acceptance of family planning, impacting male involvement and support.

a. Patriarchal System and Male Attitudes toward Family Planning

The patriarchal system is characterized by power, dominance, hierarchy, and competition. Thus, patriarchy is a system of social structures and practices, in which men dominate, oppress, and exploit women. Many societies have a patriarchal structure and without the approval of men, women have very little choice in their contraception. In a patriarchal community, like the

Somali refugee community, men as the husbands in a family have an important say in decision-making about family size, spacing, maternal health, and the general level of reproductive health in the family (Anyango 2019). As the FP service delivery system is largely female-oriented, there are very limited opportunities for men to receive FP information from service providers, and hence because they cannot receive FP information, they cannot make proper judgments regarding the same. Thus, any FP programme that isolates men are bound to have minimal impact (Anyango 2019, Ukaegbu, 2014).

b. Cultural Beliefs about Family Size and Male Attitudes toward Family Planning

Cultural norms in many Nigerian communities highly value large families, which are seen as a source of social status and economic advantage. Children are often regarded as assets who can contribute to family labor and provide support for parents in old age. This perception influences male attitudes, with men in rural or lower socioeconomic settings more likely to resist family planning in favor of maintaining traditional family structures (Bello et al., 2023).

c. Religious Beliefs and Male Attitudes toward Family Planning

Religion has a profound impact on male attitudes toward family planning in Nigeria. In some communities, religious leaders or institutions discourage the use of contraception, viewing it as contrary to religious teachings on procreation. Studies indicate that men who hold strong religious beliefs are less likely to support or engage in family planning, especially if they perceive it as conflicting with their faith (Ogunjuyigbe et al., 2022). Adedini et al. (2023) found that in communities where religious leaders promote the idea of “God’s will” in family size, men are more likely to hold negative views toward family planning. This alignment of religious duty with family size contributes to resistance against contraceptive use, as men fear that family planning interferes with their spiritual responsibilities. However, interventions that include religious leaders in family planning education have shown some success in reshaping attitudes by aligning family planning with health and welfare teachings (Adedini et al., 2023). Bello et al. (2023) highlight that religious leaders who oppose family planning or promote large families reinforce negative attitudes among male followers. Conversely, leaders who support family planning as part of responsible parenthood can encourage more favorable views.

d. Economic Considerations and Male Attitudes toward Family Planning

Many men in Nigeria view family planning as an additional financial burden, particularly in low-income communities. The perception that contraceptive methods require frequent medical visits, expensive supplies, or hidden costs can deter men from supporting family planning. Adedini et al. (2023) observed that low-income men often prioritize immediate household expenses over what they perceive as “non-essential” health interventions like family planning. Consequently, the financial strain leads to negative attitudes, as men see family planning as an unnecessary luxury rather than a cost-saving investment.

The direct costs of family planning services and limited subsidies further discourage men from supporting family planning. Even when free or low-cost services are available, additional expenses, such as transportation to health facilities or time away from work, can deter use. According to Kumar et al. (2023), men in economically disadvantaged communities reported avoiding family planning services due to high indirect costs, reinforcing negative attitudes and skepticism about its feasibility. In some cases, men in lower-income brackets may see large families as a form of economic security, where children contribute to household labor or income-generating activities (Guttmacher Institute, 2022). Conversely, in urban areas, higher living costs and the desire for improved quality of life have led some men to view family

planning as economically beneficial, allowing them to provide better resources and education for fewer children (Kumar et al., 2023).

e. Educational/Awareness Levels and Male Attitudes toward Family Planning

Education and awareness play critical roles in shaping attitudes toward family planning. Education is a primary determinant of attitudes toward family planning, as it affects individuals' ability to access, interpret, and understand information about reproductive health. Studies show that educated men are more likely to have a positive attitude toward family planning because they are better informed about contraceptive options, health benefits, and the role of family planning in promoting family welfare (Adewale et al., 2021). Education enables men to critically assess and question traditional beliefs, which can reduce resistance to contraceptive use. Men with higher levels of education tend to have a better understanding of family planning's health and economic benefits, making them more likely to support its use. Awareness campaigns, particularly those that are culturally tailored and involve male role models, have shown promise in positively impacting attitudes by providing accurate information and debunking misconceptions (Cleland et al., 2022).

f. Spousal Communication and Male Attitudes toward Family Planning

Effective spousal communication helps clarify misconceptions about family planning, which is crucial in a context where myths and misinformation are prevalent. According to Adedinet al. (2023), men who engage in open discussions with their wives about family planning are more likely to understand its benefits and dispel myths, such as the notion that contraceptives lead to infertility or reduced masculinity. When spouses communicate openly, men receive more accurate information, which can counteract the influence of community myths and social stigmas. Spousal communication supports a shared approach to family planning, promoting joint decision-making and reducing the perception that family planning is solely a woman's responsibility. Bello et al. (2023) found that men involved in family planning discussions with their spouses are more likely to take an active role in contraceptive decision-making. This shift toward shared responsibility not only improves male support for family planning but also enhances marital satisfaction and cooperation, as partners work together toward shared family goals. Ogunjuyigbe et al. (2022) highlight that in cases where women are unable to openly discuss family planning, men may become suspicious, fearing that contraceptives are being used for ulterior motives. However, open communication can mitigate these fears by building trust and allowing couples to discuss the benefits of family planning without suspicion or secrecy. This trust-building process has been shown to improve male support for family planning practices.

g. Myths and Misconceptions and Male Attitudes toward Family Planning

A common myth in Nigerian communities is that contraceptives, particularly hormonal methods, can cause serious health problems, such as infertility or chronic illness (Adewale et al., 2021). Some men believe that family planning methods may harm their partners' health or lead to permanent reproductive issues, which discourages their involvement. This fear is reinforced by limited access to accurate health information, as well as negative anecdotes shared within the community. A recent study by Kumar et al. (2023) highlights that these health-related misconceptions are often due to a lack of reliable information, particularly in rural areas, where access to healthcare professionals and family planning counseling is limited. For many men, myths about family planning are tied to ideas of masculinity and sexual prowess. In some communities, men believe that using or supporting family planning methods may reduce their sexual drive or interfere with their ability to satisfy their partners, which is

often seen as a core component of their masculine identity (Bello et al., 2023). This notion can lead men to resist family planning out of fear that they may be perceived as weak or lacking virility. Adedinet al. (2023) point out that, in traditional Nigerian settings, the perception of contraception as a “woman’s concern” further discourages male engagement, as men fear that involvement might challenge their roles within their households or communities. Some Nigerian men are influenced by the misconception that using family planning can lead to long-term or permanent infertility, especially if they or their partners use contraceptives for extended periods (Guttmacher Institute, 2022). These concerns are exacerbated by a lack of education on how different family planning methods work. Misunderstandings around reversible methods, such as IUDs and hormonal implants, contribute to the belief that contraception could hinder future fertility goals, leading many men to oppose or discourage its use (Ogunjuyigbeet al., 2022).

Measures of Improving Male Attitudes toward Family Planning

Interventions targeting men as asserted by Hardee et al. (2016) have taken traditional public health forms: communication skills counseling, promotion through local leaders and extension workers, and mass media campaigns. After examining couples’ decision-making processes in Malawi, Mbweza et al. (2008) suggested that couples follow 4 steps: (1) initiate communication, (2) explore options, (3) find the solution(s), and (4) make final decisions. Although these steps are useful, they are hard to follow unless both partners come to the discussion with a clear understanding of the benefits and challenges of each method and the communication skills to talk openly (Shattuck et al., 2011). Mass media has long been used to promote artificial family planning and is considered a promising intervention, while the use of social media is more recent and is considered emerging. This type of programming, including media and advertising campaigns carried out via radio, television, newspapers, billboards, brochures, and social media sites, such as Facebook, can address men’s use of contraception as well as increase men’s support for their partners’ contraceptive use. They can shift the perception that artificial family planning is a women’s affair. They can also address gender norms and equality in artificial family planning and contraceptive use (Hardee et al., 2016). Economic incentives, such as subsidies for family planning services or rewards for small family sizes, can encourage male participation by addressing financial concerns associated with large families. In economically constrained communities, financial burdens are a significant factor in family planning decisions (UNFPA, 2022). Effective policy requires ongoing monitoring and evaluation of family planning programs to understand their impact and adjust strategies accordingly. Data collected on male participation rates, attitudes, and service utilization can guide policy adjustments and improve program efficiency (Bello &Fatusi, 2023).

Conclusion

To enhance male attitudes toward family planning in Nigeria, policy interventions and strategies must address sociocultural, educational, and economic factors that influence male perceptions and involvement. Policy strategies that involve community leaders, promote education, dispel myths, provide accessible services, and encourage spousal communication can significantly improve male attitudes toward family planning in Nigeria. Tailoring these approaches to address cultural and economic realities can create a more supportive environment, ultimately leading to broader acceptance and involvement in family planning initiatives.

Recommendations

Based on the study the following recommendations were made:

1. Community leaders, including religious and traditional figures, significantly influence male attitudes toward family planning. Policymakers should leverage the role of respected leaders in community advocacy by engaging them in family planning campaigns. Research suggests that when influential leaders endorse family planning, it reduces stigma and increases acceptance
2. Gender-sensitive education that includes both men and women in discussions about family planning is essential. Men often hold misconceptions about contraceptives or believe family planning is solely a woman's responsibility, which can hinder their involvement. Policymakers should promote family planning curricula in schools and community centers that emphasize shared responsibility in reproductive health. Initiatives that provide information on the economic and health benefits of family planning for families can help reshape male attitudes.
3. Peer-led educational programs have proven effective in shifting male attitudes, as men are more likely to trust and emulate information shared by peers within their social networks. Peer-led interventions increase male engagement by addressing misconceptions and highlighting practical benefits from trusted sources. Policy strategies should invest in training local male advocates who can conduct peer education sessions, provide support, and promote positive family planning experiences.
4. Many men harbor misconceptions about the impact of contraceptives on health and fertility. Policymakers can implement targeted media campaigns to dispel myths, emphasizing scientific evidence and sharing testimonies from men who support family planning. Highlight the success of evidence-based campaigns in communities where misinformation is prevalent, as these initiatives help correct myths and encourage more positive attitudes.
5. Government should make policies that aim in creating more accessible, male-friendly family planning services. Health centers that provide men with privacy, education, and counseling could encourage greater male involvement, as men may feel more comfortable discussing family planning in environments tailored to their needs. Implementing mobile clinics or community-based service points could improve access for men in rural areas, where health services are limited.

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