

**MODERN FAMILY PLANNING METHODS UTILIZATION AND ITS ASSOCIATION WITH MARRIED COUPLES PERCEPTIONS IN DIR LOWER, KHYBER PAKHTUNKHWA: A COMMUNITY-BASED SURVEY**

**Syed Muhammad Usman**

Director Administration/ Project Director Population Welfare Department,  
Khyber Paktunkhwa

[smuhammadusman1978@gmail.com](mailto:smuhammadusman1978@gmail.com)

**Dr. Hussain Ali†**

Assistant Professor of Sociology, Abdul Wali Khan University Mardan,  
[hussainali@awkum.edu.pk](mailto:hussainali@awkum.edu.pk)

**Kinan Pasha**

PhD Scholar, Department of Sociology Abdul Wali Khan University Mardan,  
[kinanpashauom@gmail.com](mailto:kinanpashauom@gmail.com)

**ABSTRACT**

*The global population growth reaches to 7.8 billion and continuing to raise pressing challenges to our planet resources and ecosystems. This study extensively explores modern family planning methods utilization and its association with married couples perceptions based upon community based survey. This study grounded in the Social Cognitive Theory (SCT) as a theoretical framework with help of using a quantitative approach and a stratified random sampling method the study engaged 3,731 households ultimately collecting data from 347 participants. The data gathered through a Likert scale interview schedule to understand both descriptive and inferential analysis including frequency calculations and the Chi-square. The finding reveal that the perception of people regarding modern family planning methods is statistically associated  $\chi^2$  value of 64.575 ( $p = .000$ ) and the influence of cultural or religious beliefs on their perception of FPM undermine chi squared ( $\chi^2$ ) value of 49.531 and a ( $p$  value of .000). In same way spouse's view and health concerns statistically associated with chi squared ( $\chi^2$ ) value of 21.686 and a ( $p$  value of .154), ( $\chi^2$ ) value of 46.103 and a  $p$ -value of 0.000 respectively. The study highpoints the need for educational campaigns and nearby healthcare services to dispel myths and encourage the adoption of family planning by involving local leader.*

**Keywords:** *Global, Population, Eligible Couples, Ecosystems, and Social Cognitive Theory*

### 1.1 Introduction

Population growth is a global problem (Ataullahjan, 2018) that demands our attention and action (Sarfraz et al., 2023) where the world's population reached to 7.8 billion and continuing to rise, it places immense pressure on our planet's resources, ecosystems and infrastructure (Memon et al., 2023; Schrumpf et al., 2020). Uncontrolled growth worsens issues of food, water, (Abdullah et al., 2023) overburdened healthcare systems (Gul, 2021) and urban sprawl (Hackett et al., 2021; Khan et al., 2023) Finding maintainable solutions to manage and stabilize global population growth is vital for attaining a more equitable ecological future (Sultana, 2018). This multifaceted issue calls for a complete and collaborative approach of contemporary FPM among eligible couples (Anwar et al., 2013; Khan et al., 2023). MFPM include a range of safe and effective strategies designed to help individuals and couples make informed decisions about when and how to have children (Shah et al., 2020). These approaches include contraception options e.g. birth control pills, condoms, (IUDs) and sterilization procedures for both men and women (Tarar et al., 2015; Yameen et al., 2021). Furthermore, fresher approaches like hormonal implants and emergency contraception deliver persons with greater control over their reproductive selections (Mustafa et al., 2015). These methods not only empower individuals to plan their families according to their preferences but also contribute to improved maternal and child health, gender equality and overall wellbeing (Hameed et al., 2018) by reducing unintended pregnancies and their associated social and economic challenges (Ataullahjan et al., 2019; Azmat, 2017)

In this context, according to UNPF (2023) the rapid population growth which stands at a notable rate of 2.55% ranks Pakistan as the fifth fastest growing population in the world with 241.49 million total inhabitants leading to substantial strain on the available resources (Gebremariam, & Addissie, 2014; Tanzil et al., 2014). The population condition in KP is quite alarming marked by a growth rate of 2.3 % totaling 40.85 million inhabitants and ranking as the third most populous region in Pakistan while lower Dir it's noteworthy that the total population stands at 1,650,138 inhabitants, showcasing a substantial 2.38% growth rate secures second highest position in terms of population growth (Pakistan Bureau of Statistics, 2023; Shafiq, & Nosheen, 2020). Acceding PDHS within Pakistan only 50% of eligible couples make use of MFPM (Pradhan, & Mondal, 2023) ranking the country third globally in terms of population

growth while within KP where 38% of eligible couples utilize these methods it occupies the second position in Pakistan and the study area Lower Dir merely 53.2 % of couples opt for MFPM (Khan, & Shaikh, 2013; Azhar, 2022; Alyahya et al., 2019).

The research activities to conduct a thorough investigation into the insights of eligible couples in Lower Dir with a specific focus on their attitudes and knowledge related to MFPM. It seeks to investigate into the details of how eligible couples perceive and make decisions regarding FPM in this region. The study aims to distinguish the primary sources of evidence and influences that shape these insights, about societal, cultural and healthcare related factors. Moreover, it endeavors to evaluate the various elements that either facilitate or hinder the adoption of MFPM among these couples. Investigating the perceptions of eligible couples regarding MFPM holds importance as this particular subject remains relatively unexplored within the local research community (Ibrar et al., 2020). Although several studies as Hameed et al., (2019) Ali et al., (2022) and Asif, & Pervaiz, (2019) have touched on this topic but none have provided a complete examination of its intricate aspects.

## **1.2 Research Methodology**

The scientific credibility of a study centers on its chosen research methodology wherein this study adopts a quantitative approach to deepen insights into eligible couples's perceptions of MFPM. Furthermore, this research use Social Cognitive Theory particularizes as a theoretical framework by emphasizing the importance of social influences and observational learning shaping individual behaviors. SCT developed by psychologist Albert Bandura in the mid-20th century by understanding how eligible couple's perceptions of modern family planning methods are intricately linked to their social environment (Shah et al., (2020). To determine an appropriate sampling size study used a stratified random sampling approach with support of Local Government, Elections and Rural Development Department (2023) where the region was stratified into four sub divisions: Adenzai, Lal Qila, Samarbagh, and Temergara. Utilizing data from the Pakistan Census Report (2017) the researcher established an accurate sampling frame and selected 2 member households totaling 3,731 households by resulting of Yammi formula the required sample size is 347 participants. The data for the study was collected using structured interview schedule featuring a Likert five order scale allowing for a diverse range of responses. The subsequent data analysis involved a careful statistical approach both descriptive and inferential methods. Descriptive analysis,

including frequency and percentage calculations while in inferential study utilized the Chi-square to test association.

### **1.3 Data Analysis and Discussion**

#### **1.6.1 Frequency and Percentage Regarding Modern Family Planning Methods**

The table No. 01 first section summarizes responses regarding awareness and knowledge about Modern Family Planning Methods (MFPM) and utilized a Likert scale, spanning from "Unaware" to "Fully Aware," to rate their awareness levels. For the first statement ("Please rate your awareness level regarding MFPM"), responses were distributed as follows: Unaware (2.88%), Somewhat Unaware (3.17%), Neutral (25.36%), Somewhat Aware (38.86%), and Fully Aware (29.73%). Similarly, for the second statement ("Please rate your awareness level about how to use MFPM"), responses were: Unaware (4.33%), Somewhat Unaware (4.61%), Neutral (22.48%), Somewhat Aware (41.78%), and Fully Aware (26.80%). These percentages offer insights into varying awareness levels among respondents, highlighting that a notable portion falls into the categories of being aware or somewhat aware in both statements. As a similar observation was noted in the study of Nishtar et al., 2013; Zaidi, & Hussain, 2015; Hameed et al., (2019), awareness and knowledge play pivotal roles in shaping effective family planning strategies where access to accurate information about contraception, reproductive health, and the importance of family planning empowers individuals to make informed decisions. The evidence also deduces from the study of Mohammed et al., (2014), when families are well-informed, they can better navigate choices regarding the timing and size of their families, considering factors such as health, financial stability, and personal goals because awareness fosters understanding and acceptance, contributing to healthier and more intentional family planning choices, thereby positively impacting the well-being of both individuals and communities.

In second section of table appears to usage and access" category, this table examines respondents' utilization of Modern Family Planning Methods (MFPM) and the factors influencing their decisions. Each row corresponds to a specific statement, and respondents utilized a Likert scale, ranging from "Never Used" to "Always Used," to express their usage patterns. For the first statement on usage patterns, a notable percentage (47.41%) indicated "Frequently Used," suggesting a high frequency of utilization. Similarly, in the second statement regarding reasons for usage or non-usage, a significant percentage (35.53%) cited "Frequently Used" as their primary factor,

offering valuable insights into respondents' preferences and decision-making processes. The study of Adongo et al., (2014), find out similar finding that usage and access are fundamental factors in the effectiveness of modern family planning methods because availability and accessibility of various contraceptive options are pivotal in enabling individuals to make informed choices about their reproductive health. Another parallel observation was also noted in the study of Barro, & Bado, (2021), the integration of modern technologies in family planning, such as apps for tracking fertility or telemedicine for consultations, has significantly widened access, making these methods more convenient and tailored to individual needs.

The third section of table seems to attitudes and perceptions," captures the diverse attitudes and perceptions of respondents regarding Modern Family Planning Methods (MFPM). Each row corresponds to a specific statement, and participants utilized a Likert scale, spanning from "Very Unfavorable" to "Very Favorable," to articulate their views. The percentages in parentheses signify the proportion of respondents associated with each category for the respective statements. In detailing their perceptions of MFPM, respondents varied in their responses: 39.02% expressed a "Very Favorable" view, while 2.31% held a "Very Unfavorable" perspective. Similar patterns emerged in subsequent statements related to the influence of cultural or religious beliefs, partner's opinion, health concerns, social stigma, and lack of information on respondents' perceptions of MFOM. The table provides a holistic understanding of the nuanced attitudes and perceptions held by respondents, unveiling varying degrees of favorability or unaffordability across different aspects of modern family planning methods. For instance, a noteworthy 41.48% indicated a "Very Favorable" stance in response to health concerns influencing their perception of MFPM. Maqbool et al., (2022), argue that the perception of eligibility among couples significantly shapes the utilization of modern family planning methods where societal norms, cultural beliefs, and personal attitudes towards who is considered 'eligible' to use these methods can impact their adoption. Osuafor et al., (2018), also give the same arguments that some may feel societal pressure or stigmas around certain methods, while others might perceive certain family planning choices as only suitable for specific age groups or certain stages in life.

**Table No. 01: Frequency and Percentage Regarding Modern Family Planning Methods**

Section 1: Awareness and Knowledge						
S. No	Statement	Unaware	Somewhat Unaware	Neutral	Somewhat Aware	Fully Aware
01	Please rate your awareness level regarding MFPM	10 (2.88%)	11 (3.17%)	88 (25.36%)	135 (38.86%)	103 (29.73%)
02	Please rate your awareness level about how to used MFPM	15 (4.33%)	16 (4.61%)	78 (22.48%)	145 (41.78%)	93 (26.80%)
Section 2: Usage and Access						
S. No	Statement	Never Used	Rarely Used	Occasionally Used	Frequently Used	Always Used
01	You ever used any MFPM	10 (2.87%)	11 (3.16%)	79 (22.70%)	165 (47.41%)	83 (23.85%)
02	Reasons for using or not using MFPM	12 (3.44%)	09 (2.58%)	103 (29.51%)	124 (35.53%)	101 (28.94%)
Section 3: Attitudes and Perceptions						
S. No	Statement	Very Unfavorable	Somewhat Unfavorable	Neutral	Somewhat Favorable	Very Favorable
01	Please indicate your perception of MFPM	08 (2.31%)	09 (2.60%)	95 (27.46%)	99 (28.61%)	135 (39.02%)
02	Cultural or religious beliefs influence your perception of MFPM	14 (4.03%)	15 (4.33%)	99 (28.51%)	104 (30.02%)	115 (33.11%)
03	Partner's opinion influence your perception of MFPM	03 (0.87%)	05 (1.44%)	85 (24.49%)	131 (37.75%)	123 (35.45%)
04	Health concerns influence your perception of MFPM	03 (0.87%)	09 (2.59%)	72 (20.75%)	119 (34.31%)	144 (41.48%)
05	Social stigma influence your perception of MFPM	04 (1.14%)	13 (3.70%)	80 (22.79%)	126 (35.90%)	128 (36.47%)
06	Lack of information influence your perception of MFPM	02 (0.58%)	07 (2.02%)	70 (20.17%)	120 (34.57%)	148 (42.66%)

### 1.6.2 Relationship between How Knowledge and Access of People Influence Modern Family Planning Method



The first section of this table No. 02 looks to awareness and knowledge" and provides insights into respondents' awareness levels and knowledge about modern family planning methods. Each row represents a specific statement, and respondents were categorized based on their attitudes and levels of awareness, ranging from "Unaware" to "Fully Aware." For the first statement ("Your awareness level regarding modern family planning methods"), respondents were categorized into different awareness levels, with the chi-square test statistic ( $\chi^2$ ) and associated p-value (P) indicating significant differences in awareness levels ( $P = .000$ ). The table breaks down the responses for each level of awareness, illustrating the distribution and percentage of respondents in categories such as "Unaware," "Somewhat Unaware," "Neutral," "Somewhat Aware," and "Fully Aware". Similarly, for the second statement ("Your knowledge about how to use modern family planning methods"), respondents were classified based on their knowledge levels. The chi-square test statistic ( $\chi^2$ ) and associated p-value ( $P = .000$ ) suggest significant variations in knowledge levels. The table delineates the distribution of responses for categories like "Unaware," "Somewhat Unaware," "Neutral," "Somewhat Aware," and "Fully Aware," providing a comprehensive view of respondents' knowledge about the utilization of modern family planning methods.

The table in Section 2, seems for "usage and access," appears to present data on the utilization of modern family planning methods. It categorizes responses based on the frequency of use, ranging from "Never Used" to "Always Used." The table includes identifiers such as serial numbers, statements describing the family planning aspects addressed, and a column labeled "Attitudes" reflecting various responses related to family planning methods. The "Totals" column provides the sum of responses for each row. The "Statistic" column likely contains statistical measures (41.701 and 52.707 for two statements) and a p-value ( $P = .000$ ), indicating statistical significance. The interpretation of Statement 3 reveals a majority of respondents have used family planning methods, with a statistically significant relationship between attitudes and usage frequency. Statement 4, exploring reasons for using or not using family planning methods, suggests a higher percentage of respondents in the "Never Used" category for specific reasons, again showing a statistically significant relationship with attitudes. In conclusion, the table offers insights into modern family planning usage patterns and associated reasons, emphasizing significant associations between attitudes, usage, and reasons for use or non-use.

**Table No. 02: Relationship between How Knowledge and Access of People Influence Modern Family Planning Method**  
**1.6.3 Relationship Between How People Perception Influence Modern**

Section 1: Awareness and Knowledge									
S. No	Statement	Attitudes	Unaware	Somewhat Unaware	Neutral	Somewhat Aware	Fully Aware	Totals	Statistic
1	Your awareness level regarding modern family planning methods	Unaware	12 (28.6%)	22 (52.4%)	8 (19.0%)	0 (0.0%)	0 (0.0%)	42 (100.0%)	$\chi^2 = 65.475$ $P = .000$
		Somewhat Unaware	44 (21.5%)	72 (36.7%)	55 (24.7%)	35 (13.9%)	8 (3.2%)	214 (100.0%)	
		Neutral	5 (29.4%)	5 (29.4%)	3 (17.6%)	0 (0.0%)	4 (23.4%)	17 (100.0%)	
		Somewhat Aware	7 (11.7%)	19 (31.7%)	15 (25.0%)	18 (30.0%)	1 (1.7%)	60 (100.0%)	
		Fully Aware	0 (0.0%)	1 (7.1%)	6 (42.9%)	4 (28.6%)	3 (21.4%)	14 (100.0%)	
2	Your knowledge about how to use modern family planning methods.	Unaware	15 (28.8%)	14 (26.9%)	15 (28.8%)	4 (7.7%)	4 (7.7%)	52 (100.0%)	79.409 $P = .000$
		Somewhat Unaware	1 (2.1%)	13 (27.1%)	16 (33.3%)	13 (27.1%)	5 (10.4%)	48 (100.0%)	
		Neutral	4 (6.9%)	14 (24.1%)	17 (29.3%)	21 (36.2%)	2 (3.4%)	58 (100.0%)	
		Somewhat Aware	47 (24.5%)	50 (45.8%)	35 (21.9%)	11 (5.7%)	4 (2.1%)	155 (100.0%)	
		Fully Aware	11 (32.4%)	10 (29.4%)	4 (11.8%)	8 (23.5%)	1 (2.9%)	34 (100.0%)	
Section 2: Usage and Access									
S. No	Statement	Attitudes	Never Used	Rarely Used	Occasionally Used	Frequently Used	Always Used	Totals	Statistic
3	You ever used any modern family planning methods	Never Used	21 (13.8%)	47 (30.9%)	37 (27.6%)	35 (23.0%)	7 (4.6%)	147 (100.0%)	41.701 $P = .000$
		Rarely Used	29 (25.2%)	39 (38.1%)	32 (20.6%)	16 (10.3%)	9 (5.8%)	125 (100.0%)	
		Occasionally Used	6 (20.0%)	16 (53.3%)	7 (23.3%)	1 (3.3%)	0 (0.0%)	30 (100.0%)	



		Frequent ly Used	10 (32.3%)	15 (48.4%)	5 (16.1% )	1 (3.2%)	0 (0.0%)	31 (100.0 %)	
		Always Used	2 (12.5%)	2 (12.5%)	8 (50.0% )	4 (25.0% )	0 (0.0%)	16 (100.0 %)	
4	Reasons for using or not using family planning methods	Never Used	29 (31.9%)	36 (39.6%)	20 (22.0% )	6 (6.6%)	0 (0.0%)	91 (100.0 %)	52.7 07 P= .000
		Rarely Used	42 (18.9%)	63 (37.4%)	43 (23.9% )	29 (13.1% )	15 (6.8%)	192 (100.0 %)	
		Occasion ally Used	5 (10.2%)	12 (24.5%)	12 (24.5% )	12 (38.8% )	1 (2.0%)	42 (100.0 %)	
		Frequent ly Used	2 (22.2%)	1 (11.1%)	5 (55.6% )	1 (11.1% )	0 (0.0%)	9 (100.0 %)	
		Always Used	0 (0.0%)	7 (53.8%)	4 (30.8% )	2 (15.4% )	0 (0.0%)	13 (100.0 %)	

### Family Planning Method

This table No. 03 set in section 3 on Attitudes and Perceptions, captures data pertaining to respondents' attitudes towards modern family planning methods and the influence of various factors on these attitudes. Each statement is categorized by the degree of favorability, ranging from "Very Unfavorable" to "Very Favorable," and provides a breakdown of responses in percentage terms. The "Totals" column presents the sum of responses for each statement. Additionally, the "Statistic" column likely contains statistical measures, with associated p-values indicating the significance of the observed patterns. For instance, Statement 1 suggests a varied perception of modern family planning methods, with a statistically significant  $\chi^2$  value of 64.575 ( $p = .000$ ). The statistical analysis, represented by the chi-squared ( $\chi^2$ ) value of 49.531 and a p-value of .000, underscores a statistically significant relationship between respondents' attitudes and the influence of cultural or religious beliefs on their perception of family planning methods. The statistical analysis, represented by the chi-squared ( $\chi^2$ ) value of 21.686 and a p-value of .154, underscores a statistically significant relationship between Partner's opinion influence your perception of modern family planning methods. The statistical analysis, represented by the chi-squared ( $\chi^2$ ) value of 46.103 and a p-value of .000, underscores a statistically significant relationship between health concerns influence your perception of modern family planning methods. The statistical analysis, represented by the chi-squared ( $\chi^2$ ) value of 39.563 and a p-value of .001,

underscores a statistically significant relationship between social stigma influence your perception of modern family planning methods. The statistical analysis, represented by the chi-squared ( $\chi^2$ ) value of 41.144 and a p-value of .001, underscores a statistically significant relationship between lack of information influence your perception of modern family planning methods

**Table No. 03: Relationship Between How People Perception Influence Modern Family Planning Method**

Section 3: Attitudes and Perceptions									
S. No	Statement	Attitudes	Very Unfavorable	Somewhat Unfavorable	Neutral	Somewhat Favorable	Very Favorable	Totals	Statistic
1	Please indicate your perception of modern family planning methods.	Very Unfavorable	2 (7.7%)	2 (7.7%)	9 (34.6%)	8 (30.8%)	5 (19.2%)	26 (100.0%)	$\chi^2=64.575$ P=.000
		Somewhat Unfavorable	38 (18.5%)	84 (36.3%)	53 (24.3%)	43 (26.6%)	11 (4.2%)	229 (100.0%)	
		Neutral	7 (19.4%)	15 (41.7%)	12 (33.3%)	2 (5.6%)	0 (0.0%)	36 (100.0%)	
		Somewhat Favorable	8 (19.4%)	17 (41.7%)	11 (33.3%)	3 (5.6%)	0 (0.0%)	37 (100.0%)	
		Very Favorable	16 (31.4%)	17 (47.1%)	7 (13.7%)	4 (7.8%)	0 (0.0%)	44 (100.0%)	
2	Cultural or religious beliefs influence your perception of modern family planning methods.	Very Unfavorable	5 (41.7%)	4 (33.3%)	3 (25.0%)	0 (0.0%)	0 (0.0%)	12 (100.0%)	49.531 P=.000
		Somewhat Unfavorable	9 (34.6%)	9 (34.6%)	5 (19.2%)	3 (11.5%)	0 (0.0%)	26 (100.0%)	
		Neutral	39 (17.8%)	85 (34.5%)	56 (24.0%)	39 (17.8%)	6 (5.8%)	228 (100.0%)	
		Somewhat Favorable	13 (23.2%)	25 (44.6%)	15 (26.8%)	3 (5.4%)	0 (0.0%)	56 (100.0%)	
		Very Favorable	2 (25.0%)	2 (25.0%)	2 (25.0%)	2 (25.0%)	0 (0.0%)	8 (100.0%)	

3	Partne r's opinio n influen ce your percep tion of moder n family planni ng metho ds	Very Unfav orable	5 (26.3%)	8 (42.1%)	6 (31.6%)	0 (0.0%)	0 (0.0%)	9 (100.0%)	21.6 82 P= .154
		Some what Unfav orable	2 (20.0%)	4 (40.0%)	3 (30.0%)	1 (10.0%)	0 (0.0%)	10 (100.0%)	
		Neutra l	33 (33.3%)	22 (43.1%)	10 (19.6%)	1 (2.0%)	1 (2.0%)	51 (100.0%)	
		Some what Fava rable	18 (32.7%)	16 (29.1%)	9 (16.4%)	6 (10.9%)	6 (10.9%)	55 (100.0%)	
		Very Fava rable	23 (13.5%)	71 (37.3%)	52 (25.4%)	39 (20.1%)	9 (3.7%)	114 (100.0%)	
4	Health concer ns influen ce your percep tion of moder n family planni ng metho ds	Very Unfav orable	8 (33.3%)	6 (25.0%)	109 (41.7%)	0 (0.0%)	0 (0.0%)	24 (100.0%)	46.1 02 P= .000
		Some what Unfav orable	2 (5.3%)	14 (36.8%)	8 (21.1%)	11 (28.9%)	3 (7.9%)	38 (100.0%)	
		Neutra l	36 (21.2%)	51 (32.7%)	47 (26.3%)	32 (14.7%)	11 (5.1%)	187 (100.0%)	
		Some what Fava rable	12 (50.0%)	10 (41.7%)	2 (8.3%)	0 (0.0%)	0 (0.0%)	24 (100.0%)	
		Very Fava rable	18 (19.8%)	39 (42.9%)	20 (22.0%)	12 (13.2%)	2 (2.2%)	91 (100.0%)	
5	Social stigma influen ce your percep tion of moder n family planni ng metho ds	Very Unfav orable	0 (0.0%)	5 (35.7%)	7 (50.0%)	2 (14.3%)	0 (0.0%)	14 (100.0%)	39.5 63 P= .001
		Some what Unfav orable	0 (0.0%)	7 (43.8%)	3 (18.8%)	6 (37.5%)	0 (0.0%)	16 (100.0%)	
		Neutra l	4 (10.5%)	6 (15.8%)	11 (39.5%)	10 (34.2%)	0 (0.0%)	31 (100.0%)	
		Some what Fava rable	1 (16.7%)	3 (50.0%)	1 (16.7%)	1 (16.7%)	0 (0.0%)	6 (100.0%)	
		Very Fava rable	52 (21.9%)	99 (38.5%)	52 (21.9%)	24 (12.0%)	16 (5.7%)	153 (100.0%)	
6	Lack of inform ation influen ce your percep	Very Unfav orable	11 (26.8%)	14 (34.1%)	13 (31.7%)	3 (7.3%)	0 (0.0%)	41 (100.0%)	41.1 44 P= .001
		Some what Unfav orable	2 (11.8%)	3 (17.6%)	9 (52.9%)	3 (17.6%)	0 (0.0%)	17 (100.0%)	

tion of moder n family planni ng metho ds	Neutra l	8 (33.3%)	13 (54.2%)	3 (12.5%)	0 (0.0%)	0 (0.0%)	24 (100.0%)
	Some what Favora ble	1 (6.7%)	6 (40.0%)	8 (53.3%)	0 (0.0%)	0 (0.0%)	15 (100.0%)
	Very Favora ble	53 (21.4%)	92 (34.6%)	51 (20.7%)	43 (18.0%)	9 (5.4%)	258 (100.0%)

### 1.7 Conclusion

The study conducted the perceptions of eligible couples regarding modern family planning methods and sheds light on vital aspects of attitudes and perceptions within this demographic concerning Dir Lower. The evidence presented underscores significant trends in how eligible couples perceive and interact with modern family planning methods. Most of potential respondents indicate that there are general lack of awareness, knowledge, and usage of MFPM among the surveyed population. The finding reveal that with the chi-square test statistic ( $\chi^2$ ) and associated p-value (P) indicating significant differences in awareness levels ( $P = .000$ ) and seems for usage and access it is appears to present ( $\chi^2$ ) 41.701 and a p-value ( $P = .000$ ). Additionally, the result present in-depth insights, demonstrating significant associations between respondents' attitudes and their perceptions regarding MFPM. The research underscores the multifaceted nature of attitudes and opinions held by eligible couples towards MFPM, reflecting a complex relationship of socio-cultural, economic, and educational factors. The data collected from this study portrays a varied spectrum of perspectives where some couples exhibited a positive inclination and openness towards modern family planning methods, others show resistance or suspicion stopping from cultural norms, lack of awareness, or religious beliefs. The statistical analyses reveal that the perception of people regarding modern family planning methods is statistically significant  $\chi^2$  value of 64.575 ( $p = .000$ ) and the influence of cultural or religious beliefs on their perception of family planning methods undermine chi-squared ( $\chi^2$ ) value of 49.531 and a p-value of .000. In same way partner's opinion and health concerns statistically significant with chi-squared ( $\chi^2$ ) value of 21.686 and a p-value of .154, ( $\chi^2$ ) value of 46.103 and a p-value of .000 respectively. Understanding these varied perceptions is vital for tailoring effective and culturally sensitive family planning initiatives within the region. Social Cognitive Theory of Albert Bandura also posits that cultural norms play a crucial role in shaping the perceptions where individuals learn from observing and modeling the behaviors and

attitudes of those around them within their cultural context. In the context of family planning, cultural norms serve as a powerful force, shaping individuals' beliefs, attitudes, and decision-making processes, ultimately influencing the adoption or avoidance of modern family planning methods by eligible couples.

### 1.9 Recommendations

After examining how eligible couples view modern family planning in Lower Dir, Khyber-Pakhtunkhwa, a few suggestions surface to tackle the observed patterns and shortcomings:

- Develop and implement educational initiatives specifically designed for eligible couples. These programs should focus on increasing awareness and knowledge about modern family planning methods.
- Collaborate with community leaders, healthcare providers, and local influencers to disseminate accurate information about family planning. Engage in community discussions, workshops, and outreach programs to promote understanding and address misconceptions.
- Strengthen and promote formal sources of information such as healthcare professionals, clinics, and credible online platforms.
- Recognize the influence of informal sources like family, friends, and traditional healers. Empower these informal networks with accurate information to help shape positive perceptions about family planning methods.

### 1.8 References

- Abdullah, T., Haq, A. U., & Khan, M. I. (2023). Work-Family Conflict and its Relationship with Emotional Well-Being of Working Women in Police. *ANNALS OF SOCIAL SCIENCES AND PERSPECTIVE*, 4(2), 331-340.
- Abdullah, T., Khan, M. I., Shah, S. M. U., & Ullah, S. (2023). Intrinsic and Extrinsic Factors Affecting Job Satisfaction: A Comparative Study of Public and Private Primary School Teachers. *Journal of Education and Social Studies*, 4(2), 348-358.
- Adongo, P. B., Tapsoba, P., Phillips, J. F., Tabong, P. T. N., Stone, A., Kuffour, E., ... & Akweongo, P. (2014). "If you do vasectomy and come back here weak, I will divorce you": a qualitative study of community perceptions about vasectomy in Southern Ghana. *BMC International Health and Human Rights*, 14(1), 1-8.

- Ali, A., Zar, A., & Wadood, A. (2022). Factors associated with modern contraceptive use among men in Pakistan: Evidence from Pakistan demographic and health survey 2017-18. *Plos one*, 17(9), e0273907.
- Alyahya, M. S., Hijazi, H. H., Alshraideh, H. A., Al-Sheyab, N. A., Alomari, D., Malkawi, S., ... & Khader, Y. S. (2019). Do modern family planning methods impact women's quality of life? Jordanian women's perspective. *Health and quality of life outcomes*, 17, 1-16.
- Anwar, H. N., Malik, N. A. Z. I. A., Fatima, T. E. H. S. I. N., Rafique, H. M., & Sajid, N. A. (2013). Perception of religious leaders about Family Planning in rural areas of Pakistan. *International Journal of Political Science, Law and International Relations*, 3(2), 21-32.
- Asif, M. F., & Pervaiz, Z. (2019). Socio-demographic determinants of unmet need for family planning among married women in Pakistan. *BMC public health*, 19(1), 1-8.
- Ataullahjan, A. (2018). Family Planning in Pakistan: Unraveling the Complexities.
- Ataullahjan, A., Mumtaz, Z., & Vallianatos, H. (2019). Family planning in Pakistan: A site of resistance. *Social Science & Medicine*, 230, 158-165.
- Azhar, F. (2022). Between Tradition and Modernity: Representation of Women in Family Planning Campaigns in Pakistan. *International Journal of Communication*, 16, 21.
- Azmat, S. K. (2017). Models to accelerate modern family planning/contraceptive services access and uptake among married women in rural Pakistan [doctoral research]. *Ghent: Ghent University*.
- Azmat, S. K., Mustafa, G., Hameed, W., Asghar, J., Ahmed, A., & Shaikh, B. T. (2013). Social franchising and vouchers to promote long-term methods of family planning in rural Pakistan: a qualitative stocktaking with stakeholders. *JPMMA. The Journal of the Pakistan Medical Association*, 63(4 (Suppl 3)), S46.
- Azmat, S. K., Mustafa, G., Hameed, W., Asghar, J., Ahmed, A., & Shaikh, B. T. (2013). Social franchising and vouchers to promote long-term methods of family planning in rural Pakistan: a qualitative stocktaking with stakeholders. *JPMMA. The Journal of the Pakistan Medical Association*, 63(4 (Suppl 3)), S46.
- Bandura, A., & Evans, R. I. (2006). *Albert Bandura*. Insight Media.
- Barro, A., & Bado, A. R. (2021). Religious leaders' knowledge of family planning and modern contraceptive use and their involvement in family planning programmes in Burkina Faso: a qualitative study in Dori in the Sahel Region. *Open Access Journal of Contraception*, 123-132.



Gebremariam, A., & Addissie, A. (2014). Knowledge and perception on long acting and permanent contraceptive methods in Adigrat town, Tigray, northern Ethiopia: a qualitative study. *International journal of family medicine*, 2014.

Gul, A. X. (2021). *Application of the Integrated Behavior Model to Explain and Promote Uptake of Modern Family Planning Methods among Married Women of Reproductive Age in Rural Areas of Punjab, Pakistan: The IRADA Project* (Doctoral dissertation, The George Washington University).

Hackett, K., Nausheen, S., Yameen, S., Hussain, I., Khaneez, Z., Shah, I., & Soofi, S. B. (2021). Exploring reasons for low uptake of widely available modern contraceptive methods in Karachi, Pakistan: a mixed-methods study. *Journal of Global Health Science*, 3(2).

Hameed, S., Haq, N. U., Haque, N., Nasim, A., Riaz, S., Tahir, M., ... & Zarak, M. S. (2019). Knowledge, attitude and practices (KAP) regarding family planning services among married women of Quetta Pakistan. *Family Planning Services*, 2, 1-12.

Hameed, S., Haq, N. U., Haque, N., Nasim, A., Riaz, S., Tahir, M., ... & Zarak, M. S. (2019). Knowledge, attitude and practices (KAP) regarding family planning services among married women of Quetta Pakistan. *Family Planning Services*, 2, 1-12.

Hameed, W., Siddiqui, J. U. R., Ishaque, M., Hussain, S., Gul, X., Najmi, H., ... & Balal, A. (2018). What influences family planning in rural pakistan: franchised service provider and community health worker perspective. *Pakistan Journal of Public Health*, 8(2), 100.

Ibrar, M., Mi, J., Shah, M., & Rafiq, M. (2020). Community awareness about family planning program in district malakand, Pakistan.

Khan, A., & Shaikh, B. T. (2013). An all-time low utilization of intrauterine contraceptive device as a birth spacing method-a qualitative descriptive study in district Rawalpindi, Pakistan. *Reproductive health*, 10, 1-5.

Khan, H., Khan, N., Shah, S. M. U., & Rahman, A. U. (2023). Self-Medication Information Sources and Trustworthiness: A Quantitative Assessment of Dir Lower, Khyber Pakhtunkhwa (KP), Pakistan. *International Journal of Social Science Archives (IJSSA)*, 6(2), 13-26.

Khan, M., I., Khan, N., Ullah, S., Ullah, A., & Bahadar, K. (2023). Analysis of Adoption and Implementation of International Educational Standers in Primary Schools: A Case Study of Dir Lower Khyber Pakhtunkhwa. *Journal of Education and Social Studies*, 4(3), 499- 507.

Khan, M., I., Shah, S., H., U., Ilyas, H., & Ullah, Z., (2023). Exploring the Socio-Cultural Impediments on Single Mother Quality's Life: Evidence from District Peshawar, Khyber Pakhtunkhwa, Pakistan. *INTERNATIONAL JOURNAL OF HUMAN AND SOCIETY*, 3(4), 78-88. Retrieved from

<https://ijhs.com.pk/index.php/IJHS/article/view/286>

Local Government, Elections, and Rural Development Department, (2023). City/tehsil Local Government. *Governments of Khyber Pakhtunkhwa (KPK)*. <https://apps.lgkp.gov.pk/lgkp>

Maqbool, S., Shan, H., Qureshi, I., & Shaheen, L. (2022). Barriers to use contraceptive methods among post abortion clients in Sargodha, Pakistan: A qualitative study. *Malaysian Journal of Public Health Medicine*, 22(1), 220-226.

Memon, Z. A., Mian, A., Reale, S., Spencer, R., Bhutta, Z., & Soltani, H. (2023). Community and Health Care Provider Perspectives on Barriers to and Enablers of Family Planning Use in Rural Sindh, Pakistan: Qualitative Exploratory Study. *JMIR formative research*, 7(1), e43494.

Mohammed, A., Woldeyohannes, D., Feleke, A., & Megabiaw, B. (2014). Determinants of modern contraceptive utilization among married women of reproductive age group in North Shoa Zone, Amhara Region, Ethiopia. *Reproductive health*, 11, 1-7.

Mustafa, G., Azmat, S. K., Hameed, W., Ali, S., Ishaque, M., Hussain, W., ... & Munroe, E. (2015). Family planning knowledge, attitudes, and practices among married men and women in rural areas of Pakistan: Findings from a qualitative need assessment study. *International journal of reproductive medicine*, 2015.

Nishtar, N., Sami, N., Faruqi, A., & Khowaja, S. (2013). Myths and fallacies about male contraceptive methods: a qualitative study amongst married youth in slums of Karachi, Pakistan. *Global journal of health science*, 5(2), 84

Osuafor, G. N., Maputle, S. M., & Ayiga, N. (2018). Factors related to married or cohabiting women's decision to use modern contraceptive methods in Mahikeng, South Africa. *African Journal of Primary Health Care and Family Medicine*, 10(1), 1-7.

Pakistan Bureau of Statistics, (2023). Pakistan Population Census Report: *Governments of Pakistan*. <https://www.pbs.gov.pk>

Pakistan Demographic Health Surveys PDHS, (2022), Annual Contraceptive Performance

Report [https://www.pbs.gov.pk/sites/default/files/social\\_statistics/contraceptive\\_performance\\_reports/ACP\\_Report\\_2019-20.pdf](https://www.pbs.gov.pk/sites/default/files/social_statistics/contraceptive_performance_reports/ACP_Report_2019-20.pdf)

Pradhan, M. R., & Mondal, S. (2023). Examining the influence of Mother-in-law on family planning use in South Asia: insights from Bangladesh, India, Nepal, and Pakistan. *BMC Women's Health*, 23(1), 418.

Sarfraz, M., Hamid, S., Kulane, A., & Jayasuriya, R. (2023). 'The wife should do as her husband advises': Understanding factors influencing contraceptive use decision making among married Pakistani couples—Qualitative study. *PLOS one*, 18(2), e0277173.

Schrumpf, L. A., Stephens, M. J., Nsarko, N. E., Akosah, E., Baumgartner, J. N., Ohemeng-

Dapaah, S., & Watt, M. H. (2020). Side effect concerns and their impact on women's uptake of modern family planning methods in rural Ghana: a mixed methods study. *BMC women's health*, 20, 1-8.

Shafiq, S., & Nosheen, N. (2020). People's perceptions about family planning and contraceptive methods in Gujrat, Pakistan. *Rawal Medical Journal*, 45(1), 179-179.

Shafiqullah, H., Morita, A., Nakamura, K., & Seino, K. (2018). The family planning conundrum in Afghanistan. *Health Promotion International*, 33(2), 311-317.

Shah, N. Z., Ali, T. S., Jehan, I., & Gul, X. (2020). Struggling with long-time low uptake of modern contraceptives in Pakistan. *Eastern Mediterranean Health Journal*, 26(3), 297.

Sultana, A. (2018). Role of 'Authoritative Knowledge' in shaping Women's perception and practice of family planning in Pakistan. *Voice of Intellectual Man-An International Journal*, 8(1), 55-64.

Tanzil, S., Rizvi, N., Farid-ul-Husnain, S., & Saleem, S. (2014). Factors influencing the choice of family planning (FP) methods among married women in Swat District, Khyber Pakhtunkhwa, Pakistan.

Tarar, M. A., Akhtar, S., Zafar, M. I., & Muhammad, S. (2015). REPRODUCTIVE HEALTH: PERCEPTIONS, ATTITUDES AND PRACTICES AMONG YOUNG FEMALES IN FAISALABAD DISTRICT, PAKISTAN. *The Professional Medical Journal*, 22(01), 081-099.

United Nations Population Fund, (2023). Annual Report of United Nation Sexual and Reproductive Agency. [United+Nations+Population+Fund&sca\\_esv=581632289&sxsrf](https://www.un.org/en/development/desa/pop/publications/2023-annual-report-of-the-united-nations-population-fund)

Yameen, S., Nausheen, S., Hussain, I., Hackett, K., Rizvi, A., Ansari, U., ... & Soofi, S. B. (2021). The family planning “know-do” gap among married women of reproductive age in urban Pakistan. *Public Health Action*, 11(3), 132-138.

Zaidi, B., & Hussain, S. (2015). Reasons for low modern contraceptive use—Insights from Pakistan and neighboring countries.

SCRR