

# Factors Affecting Family Planning Information Utilization by Rural Households: The Case of Dugda Woreda, East Shewa, Ethiopia

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## Abstract

*High fertility and rapid population growth have an impact on the overall socio-economic development of a country in general and maternal and child health in particular. Ethiopia is among the developing countries where the rate of population growth is one of the highest and contraceptive prevalence rate is the lowest. The practice of family planning and its possible determinants have hardly been explored in rural parts of the country. Thus, the objectives of the study were to assess the level of family planning information utilization by the rural households in the study area and to identify factors that determine the utilization of family planning information (FPI). The study was conducted in Dugda Woreda, East Shewa Zone of Central Ethiopia where the population growth rate (2.8) is more than the national average (2.6). Dugda Woreda was purposively selected and a total of 120 sample couples were randomly selected from 4 kebeles, and interview schedule was used to collect primary data. Focus groups' discussions were held to support the survey data. Data were analyzed by using descriptive statistics and binary logit model. From the total sampled couples, 46.6% were users of family planning at the time of the survey while the remaining 53.3% were non users. The result of binary logistic regression model analysis showed that among the 17 explanatory variables entered into the model, nine of them were found to be significant at less than 10% probability level. Targeting the identified factors, and making policy and development interventions can promote the level of utilization of family planning among rural women in the study area. Therefore, policy makers and family planning service providers should give attention to factors that significantly influence family planning information utilization through emphasizing women education, health counseling, making suitable timing and duration of mass media programs.*

Keywords: family planning, determinants, Dugda woreda, rural households

## INTRODUCTION

High fertility and rapid population growth have an impact on the overall socio-economic development of a country in general and maternal and child health in particular. Moreover, high population growth rate puts pressure on the country's meager resources and poses a serious challenge in the provision of food, housing, health, educational services and employment opportunities to the general population (WHR, 2005). The WHR (2005) also noted that unwanted, mistimed and unintended pregnancy is the most common cause of maternal mortality in developing countries. Ethiopia is among the developing countries where the rate of population growth is the highest and contraceptive prevalence rate is the lowest. The practice of family planning and its possible determinants have hardly been explored in rural parts of the country. Family planning was initiated in 1960s; however, even after such a long period of time, the level of family planning utilization in Ethiopia is amongst the lowest in Africa with contraceptive prevalence rate (CPR) of 29% and the unmet need for family planning is 25%; unmet need is high in Oromia region at 30% (CSA and ICFI, 2012). Several factors had been incriminated for the low utilization of family planning services. The reasons include desire to have more children, unavailability and distance of family planning services, fear of side effects and wrong perception, religious prohibition, husband opposition and lack of spousal communication (Tularo *et al.*, 2006). According to Dugda Woreda Finance and Economic Development Office (2010) the total population of the woreda is increasing by 2.8% annually which is more than the national average 2.6%. Unless there is family planning program intervention, the annual population growth rate would increase in the future and resulting additional growth to the regional population. Therefore, this study aimed at generating information regarding factors

affecting family planning information utilization for policy makers and executive officials for intervention to fill the gap and facilitate the adoption of family planning programs more effectively.

## RESEARCH METHODOLOGY

### Description of the Study Area

Dugda woreda is one of the 12 districts in the East Shewa Zone of the regional state of Oromia, Ethiopia. It is Located in the central part of rift valley. The Woreda has 36 kebeles in its rural areas and 3 kebeles in the urban settings. The Capital town of the district is Meki which is located 134Kms away from the capital city of the country, Addis Ababa, and 88 Kms west of Adama before reaching Ziway town, along the same main asphalt road. The annual range of rainfall of the woreda and its surrounding is 700 to 800mm. The maximum annual range of temperature is 28°C while the minimum is 22°C. The district lies in the altitude range of 1500 and 2300 meters above sea level. The total population of the Woreda was estimated to be 153,044. Out of which 78,720 are male and 74,324 are female. The economy of the woreda is based on agriculture which is characterized by mixed farming (DWFEDO, 2010).

### Sample Size and Sampling Techniques

For the purpose of this study a multi stage sampling technique was used in which both purposive and random sampling techniques were applied to select sample respondents. On the first stage, out of 12 woredas of East Shewa zone, Dugda woreda was selected purposively because of the annual population growth rate of the woreda is 2.8% (DWFEDO, 2010) which is above the national annual growth rate of 2.6%. In the second stage, out of the total 36 kebeles of the woreda four kebeles were selected as per the highest population of couples available in the kebele based on the Woreda office document. In the third stage, a total of 120 households were selected using systematic random sampling from the respective list of households in the selected kebeles using probability proportional to the size of the population.

### Data and Methods of Data Collection

For this study both qualitative and quantitative data were collected from primary and secondary sources. Structured and semi-structured interview schedules were used in order to allow the respondents to express their opinion on issues related to the research. Semi-structured interview schedule was used during focus group discussions to fill the gap of the structured interview schedule. Secondary data were collected from sources like health office, health centers, and health posts in the study area. Primary data regarding socio-cultural, economic, psychological, and demographic characteristics of the sample couples were also collected from the respondents by using structured interview schedule. Moreover, focus group discussions, discussions with experts in the woreda health office, and key informant interview were held with community leaders and elders in the study area.

### Methods of Data Analysis

After completion of data collection, the collected data were compiled using SPSS software for further analysis. Qualitative data were analyzed, described and interpreted through case analysis, concepts and opinions. For quantitative data, both descriptive statistics and econometric model were employed. Since the dependant variable in this case is a dummy variable which takes a value of one if the couples use Family Planning Information (FPI) and zero otherwise, logistic regression model (Gujarati, 1998) was used to determine the factors influencing utilization of FPI. Chi-square and t-test were used for cross tabulation and mean comparison respectively to see mean differences between the users and non users which further show existence of some relationship between the independent variables and the dependent variable. T-test was used to compare the means of users and non users for continuous variables, while chi-square was used to compare the means of users and non users for discrete variables.

## RESULTS AND DISCUSSION

### Results of Descriptive Analysis

**Number of children and ideal number of children:** It is clear that the live of rural community mainly depends on agriculture that includes animal rearing and crop cultivation which requires more labor. Rural parents gain important labor contribution from children in Ethiopia (Bedada, 2010). The result of t-test shows that there is significant mean difference between the two groups with regard to number of children and the ideal number of children the couples desire to have at less than 1% and 5% probability level, respectively (Table 1).

Table 8: Mean number of children and ideal number of children (n=120)

Variables	Utilization of Family Planning Information (FPI)						t-value	p-value
	Users		Non-users		Total			
	Mean	St.Dev	Mean	St.Dev	Mean	St.Dev		
Number of children	3.98	1.931	5.05	2.319	4.55	2.203	2.710***	0.008
Ideal number of children	5.66	1.505	6.58	2.448	6.15	2.105	2.430**	0.017

Source: survey result, 2012; \*\*\*, \*\* significant at less than 1% and 5% probability level, respectively.

#### Family size preference

From the total sample respondents, 41.7% preferred smaller family size (containing 2-4 individuals) while the rest 58.3% preferred larger family size (containing  $\geq 5$  individuals) (Table 2). Statistically the chi-square test result showed that there is significant difference between the user and non-user respondents with regard to family size preferences. This indicates that the family size preference of the couples and utilization of FPI have some relationship. Haile (2007) and Bedada (2010) reported similar results.

Table 9: Percentage distribution of couples by family size preference

Family Size Preferences	Utilization of FPI						$\chi^2$ -value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
Smaller	33	58.9	17	26.6	50	41.7	12.872***	0.000
Larger	23	41.1	47	73.4	70	58.3		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\*\* significant at 1% probability level

#### Husband's Educational status

Education is one of the important variables which increase an individual's ability to acquire, process, and use FP information, and it also increases the analytical and problem solving capacity of an individual (Haile, 2007 and Bedada, 2010). Educational status of the respondent's husband was also considered as one of the factors that affect utilization decision of family planning information in the study area. As it is indicated in table 4, out of the total (120) sample respondents the educational status of their husband 54.1% was illiterate and 24.2% was literate, i.e., grade one and above; whereas 21.7% was able to read and write.

The chi-square test shows that there is significant difference between education level of users' husband and non-users' husbands at less than 5% significance level; indicating that education level of husband and use of FPI have significant relationship.

Table 10: Relationship of husband's educational status with utilization decision of FPI

Husband education	Utilization of FPI						$\chi^2$ -value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
don't read & write	26	46.4	39	60.9	65	54.1	5.325**	0.016
able to read & write	15	26.8	11	17.2	26	21.7		
1-4 grade	6	10.7	8	12.5	14	11.7		
5-8 grade	8	14.3	4	6.2	12	10.0		
9-12 grade	1	1.8	1	1.6	2	1.7		
above 12	0	0	1	1.6	1	.8		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\* significant at less than 5% probability level

### Religious background of the households

It was hypothesized that woman with firm religious beliefs have less access to and utilization of FPI. The survey result indicated that among the total respondents (120) majority (73.3%) of the respondents were Orthodox Christian. The chi-square test indicates that there is no statistically significant relationship between religious backgrounds of FPI users and non-users. The reason for insignificant relationship between religion and utilization of FPI is that most of the respondents are Christian and during focus group discussion and key informant interview most religious leaders in the study area do not openly oppose use of contraceptives.

Table 11: Percentage distribution of FPI users and non-users sample respondents by religion

Religious background	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
Waqefeta	3	5.4	3	4.7	6	5.0	1.780NS	0.281
Orthodox	43	76.8	45	70.3	88	73.3		
Muslim	3	5.4	1	1.6	4	3.3		
Protestant	5	8.9	10	15.6	15	12.5		
Catholic	2	3.6	5	7.8	7	5.8		
Total	56	100	64	100	120	100		

Source: survey result, 2012; NS=non significant

### Desire for male child

The community in the research area seems to have more desire for male child than female ones. From the total sample respondents (120) only 6.7% of the couples have desire for female children and 60% of them have more desire to have male children. The chi-square test result showed that there is significant difference between the user and non-user respondents with regard to sex preferences (desire for male child than female) at 1% significant level (table 5). This indicates that male child preference of the couples and utilization of FPI has some relationship. The study result is in agreement with a study conducted by Haile (2007).

Table 12: Percentage distribution of respondents by sex preference

Sex preference	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
Male	25	44.6	47	73.4	72	60.0	16.362***	0.000
Female	2	3.6	6	9.4	8	6.7		
Both	29	51.8	11	17.2	40	33.3		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\*\* significant at 1% probability level

### Spousal communication on family planning issues

Spousal communication helps women to get confidence to discuss reproductive issues with their husbands and crucially important in approval of the use of birth control methods. Haile (2007) reported that lack of spousal discussions about family planning and reproductive issues hinder the use of contraceptive methods. As it is shown in table 7, from the total non-users 68.8% of the respondents have no discussion with their husband and only 31.2% have discussion on FP issues with their husbands. The chi-square test result showed that there is significant difference between the user and non-user respondents with regard to spousal communication at less than 1% significant level (table 6). This indicates that couple's discussion on FP issues and utilization of FPI has

some relationship. Atigegn (2007) also indicated that lack of open discussion between husbands' and wives was among the major obstacles on the efforts towards contraceptive use.

Table 13: Relationship of spousal communication with utilization decision of FPI

Discussion between couples	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
No	17	30.4	44	68.8	61	50.8	17.614	0.000***
Yes	39	69.6	20	31.2	59	49.2		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\*\* refers significant at 1% probability level

### Mass media exposure

In rural areas radio plays an important role in providing information to the rural society. For the purpose of this research radio was taken as it is the only major mass media serving the study area for majority of the people. Other mass media like print media and television were not included in the study because of unavailability of electric power in the study area and low literacy level of respondents to read newspapers and other printed media. Therefore, frequency of utilization of radio was considered for the study purpose. The chi-square test result showed that significant relationship between frequency of listening to radio programs and utilization decision of family planning information in the study area at less than 1% probability level (table 7). Nibret (2010) also indicated that mass media exposure have an impact on utilization decision of FPI.

Table 14: Percentage distribution of respondents' by mass media exposure

Frequency of contact	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
Never	1	1.8	5	7.8	6	5.0	4.603**	0.048
Rarely	6	10.7	4	6.2	10	8.3		
Occasionally	10	17.9	8	12.5	18	15.0		
Often	21	37.5	20	31.2	41	34.2		
Always	18	32.1	27	42.2	45	37.5		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\* significant less than 5% probability level

### Wife's participation in decision making

In developing countries male play more roles in decision-making regarding contraceptive use, the timing and the number of births (Bankole and Singh, 1998). The survey results indicate that the influence of culture put women in subordinate position. Women have been in servitude; do not utilize development output equal to men. Hence, power relation and women's participation in decision making regarding to FP issues, time of child bearing and number of children to be born is expected to be one the factors that influence utilization decision of the family planning information. The chi-square test result showed that significant relationship between wife's participation in decision making and utilization decision of family planning information in the study area at less than 1% probability level (table 8). The result is in agreement with Tilahun (2008) who reported the existence of strong association between power relations in the family and utilization decision of FPI.

Table 15: Relation of wife's participation in decision making with utilization decision of FPI

Decision maker on FP issues	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	N <sub>0</sub>	(%)	N <sub>0</sub>	(%)	N <sub>0</sub>	(%)		
Husband	2	3.6	17	26.6	19	15.8	13.745***	0.001
Wife	22	39.3	13	20.3	35	29.2		
Both	32	57.1	34	53.1	66	55.0		
Total	56	100	64	100	120	100		

Source: survey result, 2012; \*\*\* significant at less than 1% probability level

### Income of the households

For the purpose of the study income is defined as the total annual earnings of a family from sale of agricultural produce, off-farm and non-farm activities. The t-test showed the absence of significant mean difference between users and non-users groups and also it illustrated as there is no association between household's income and adoption of family planning information (table,9).

### Farm size of the households

Farm size represents the area plot under the ownership of the household in timad or hector (four timad is approximately equal to one hector (ha)). An increase in farm size increases the demand for labor which in turn increases the demand for children (Zenube, 2010). Due to the fact that majority of households in the study area are agrarian and land is the most important economic variable on which the lives of the community depend. The average farm size of the total sample households is 2.46 ha. The t-test indicates that the mean difference of farm size of user and non-users is statistically significant at less than 10% probability level. This also indicates that there is some relationship between farm size and utilization of FPI in the research area.

Table 16: Relationship of income and farm size with utilization decision of FPI (n=120)

	Utilization of FPI			
	Income		Farm size	
	Users	Non-users	Users	Non-users
N	56	64	56	64
Mean	6903.54	5962.16	2.73	2.24
Std. Dev.	4316.97	4113.94	1.43	1.21
t-value	-1.222NS		-1.894*	
P-value	0.224		0.061	

Source: survey result, 2012; \*, significant at less than 10% probability level; NS=non significant

### Distance from FP service centers

It refers to the distances between family planning service centers and place of residence of sample households. It is expected that couples who are relatively nearer to family planning service centers would possess more information about FP than those who are at far distance. The t-test result indicated that there is no significant mean difference between the users and non user groups.

Table 17: Mean distance of users and non users from FP service centers in PA (n=120)

Health post distance	Utilization of FPI		t-value	p-value
	Users	Non-users		
Mean	1.29	1.53	1.373NS	0.173
Std. Dev.	0.90	0.83		

Source: survey result, 2012; NS=non significant

### Health extension contact

Health extension contact refers to the contact of women have with the health extension agents to obtain health services including family planning. The result of Chi-square test showed that there is a statistically significant difference between the users and non users in referring to the frequency of health extension contact.

Table 18: Percentage distribution of respondents with frequency of health extension contacts

Health extension contact frequencies	Utilization of FPI						$\chi^2$ - value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
once a week	19	33.9	14	21.9	33	27.5	14.582***	0.006
twice a week	11	19.6	6	9.4	17	14.2		
once in 15 days	15	26.8	14	21.9	29	24.2		
Monthly	8	14.3	10	15.6	18	15.0		
sometimes a year	3	5.4	20	31.2	23	19.2		
Total	56	100	64	100	120	100		

Source: survey result, 2012: \*\*\*, significant at less than 1% probability level

### Couples Perception of FP

Perception is one of the psychological determinants that govern an individual's behavior. If an individual have wrong perception towards family planning, his motivation to obtain information from the potential sources and media will be less. The perception of couples towards family planning information was measured by using the Likert Scale of five points.

The t-test result showed that there is a statistically significant mean difference between users and non-users of FPI with respect to couple's perception at less than 1% probability level.

Table 19: Relationship of Couples Perception of FP with utilization decision of FPI (n=120)

Perception score	Utilization of FPI		t-value	p-value
	Users	Non-users		
Mean	24.107	20.437	-3.891***	0.000
Std. Dev.	4.044	5.957		
Minimum	11.00	8.00		
Maximum	30.00	30.00		

Source: survey result, 2012: \*\*\*, significant at 1% probability level

### Fear of the side effects

This refers to the fear of any health risks an individual fears that might occur to them because of using modern contraceptive methods. People usually fear that they may be permanently sterile or face any other health complications, if they use modern contraceptive methods. The chi-square test result showed that there is a statistically significant difference between users and non-users of FPI with respect to fear of the side effects of contraceptives at less than 1% probability level.



Table 20: Distribution of respondents in relation to fear of contraceptive side effects

Fear of side effects	Utilization of FPI						$\chi^2$ -value	p-value
	Users		Non-users		Total			
	No	(%)	No	(%)	No	(%)		
No	33	58.9	10	15.6	43	35.8	24.358***	0.000
Yes	23	41.1	54	84.4	77	64.2		
Total	56	100	64	100	120	100		

Source: survey result, 2012: \*\*\*, significant at less than 1% probability level

### Information seeking behavior

Information seeking behavior is a conscious effort to acquire information from various sources on different roles people perform in response to a need or gap in their knowledge (Tibbo, 2002). The t-test result showed that there is statistically significant mean difference between users and non-users in terms of information seeking behavior score at less than 1% probability level.

Table 21: Relationship of couples' information seeking behavior with the use of FPI (n=120)

Information seeking	Utilization of FPI		t-value	p-value
	Users	Non-users		
Mean	5.911	3.687	-5.912***	0.000
Std. Dev.	1.505	2.436		

Source: survey result, 2012: \*\*\*, significant at less than 1% probability level

### Model Results

The model result from the above table revealed that variables like husband education status (HUSBEDU), desire for male child (DESMALCH), family size preference (FAMSZPRE), spousal communication (SPOUCOMM), wife participation in decision making (WPINDMAK), fear of the side effects (FEARSDEF), mass media exposure (MMEXPO), information seeking behavior (INFOSEBVR) and couples perception of FP (PERSCORE) are significantly affecting the utilization of family planning information by the rural households in the study area.

Table 22: Logistic regression estimates for factors affecting FPI utilization

Explanatory variables	Estimated coefficient (B)	S.E.	Wald statistics	Sig. level	Odds ratio Exp(B)
HUSBEDU	1.047	0.582	3.233	0.072*	2.848
RELIGION	-0.706	0.540	1.712	0.191	0.494
DESMALCH	-1.435	0.551	6.781	0.009***	4.199
FAMSZPRE	-1.551	0.919	2.849	0.091*	0.212
NUMBCH	0.168	0.229	0.536	0.464	0.845
IDEALNCH	-0.266	0.240	1.226	0.268	0.767
SPOUCOMM	1.919	1.087	3.115	0.078*	6.811
WPINDMAK	2.483	0.919	7.307	0.007***	0.083
FEARSDEF	-2.170	1.166	3.464	0.063*	0.114
FARMSIZE	0.285	0.366	0.608	0.435	1.330
INCOME	0.000	0.000	0.238	0.626	1.000
LVSTKHOLD	-0.190	0.188	1.024	0.311	0.827
HLTHPODI	0.310	0.608	0.259	0.611	1.363
HEXCONT	0.216	0.308	0.492	0.483	0.806
MMEXPO	0.809	0.480	2.839	0.092*	0.445
INFOSEBVR	0.505	0.230	4.818	0.028**	1.656
PERSCORE	0.283	0.127	4.995	0.025**	1.327
CONSTANT	1.534	3.446	0.198	0.656	4.639

Source: Model output NB: \*, \*\*, \*\*\* significant at 10%, 5% and 1% probability level, respectively



## CONCLUSION

The study was carried out with the objectives of assessing the level of utilization of FPI and the factors affecting FPI utilization by rural households. To achieve the objectives of the study both qualitative and quantitative data were collected from secondary and primary sources by using instruments like Structured and semi-structured interview schedules, focus group discussions and key informant interview. To analyze the data, descriptive statistics such as mean, standard deviation, percentage, and frequency distribution were used to describe the socio economic characteristics of the sample households. In addition, chi -square and t -tests were used for cross tabulation and mean comparison respectively to see mean differences between the users and non users of FPI which further show existence of some relationship between the independent variables and the dependent variable. Furthermore, a binary logit model was used to identify the potential factors influencing the dependent. The findings of the study revealed that from the total sample couples, 46.6% were users of FPI at the time of the survey while the remaining 53.3% were non users. A total of seventeen explanatory variables were included in the model. Out of these, nine were found to be statistically significant. These variables includes husband's educational status, desire for male child, family size preference, spousal communication, wife participation in decision making, fear of the side effects, mass media exposure, information seeking behavior and couples perception of FP. Therefore, in order to overcome these problems policy makers and family planning service providers and any other responsible bodies should give attention to factors that influence FPI utilization in the study area.

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